

REPORT OF THE INDEPENDENT INVESTIGATION

SEXUAL ABUSE COMMITTED BY DR. RICHARD STRAUSS AT THE OHIO STATE UNIVERSITY

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PERKINS COIE LLP

MAY 15, 2019

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I. EXECUTIVE SUMMARY

On April 27, 2018, in coordination with the Ohio State University’s Office of Legal Affairs, Perkins Coie LLP (“Perkins Coie,” “we,” or the “Investigative Team”) was retained by Porter Wright Morris & Arthur LLP (“Porter Wright”), which serves as appointed Special Counsel to the University, to conduct an independent factual investigation (“Independent Investigation” or “the Investigation”) of sexual misconduct allegations raised against former Ohio State University (“OSU” or “University”) physician, Dr. Richard Strauss (“Strauss”). Strauss was employed at OSU from September 1978 until March 1998, and he died in 2005.

Perkins Coie was asked to investigate and to draw factual conclusions on two fronts: first, to evaluate allegations that Strauss committed acts of sexual misconduct against members of the OSU community while he was employed by the University (the “relevant time period”), and, second, to determine whether “the University” had knowledge of such allegations against Strauss during the relevant time period. Our overall findings, which are detailed in this report (“Report”), are as follows:

First, we find that Strauss sexually abused at least 177 male student-patients he was charged with treating as a University physician—many in his capacity as a team physician with the University Athletics Department; some in his capacity as a physician in OSU’s Student Health Center (“Student Health”); and others in connection with his other pursuits, including purported “medical studies.” Strauss’ acts of abuse ranged from the overt—such as fondling to the point of erection and ejaculation—to more subtle acts of abuse that were masked with a pretextual medical purpose—for example, requiring a student-patient to strip completely naked to purportedly “assess” an orthopedic condition, or asking probing questions about a student-patient’s sexual practices or performance. We observed that, in many cases, a student’s most egregious experience of abuse did not occur during the student’s first encounter with Strauss; rather, the abuse escalated over time, in a series of examinations with the student. As a categorical whole, we find this range of acts “abusive” because they exploited the power Strauss enjoyed purely by virtue of his status in the doctor-patient relationship. Strauss was entrusted with the responsibility of providing care to his student-patients, and from that position, Strauss was able to violate their bodily autonomy and dignity, in a variety of ways.

Second, we find that University personnel had knowledge of Strauss’ sexually abusive treatment of male student-patients as early as 1979, but that complaints and reports about Strauss’ conduct were not elevated beyond the Athletics Department or Student Health until 1996. Specifically, in January 1996, the University suspended Strauss from his activities as a treating physician at OSU after a Student Health patient accused Strauss of fondling him during a genital examination. At that time, the University undertook a very limited investigation of Strauss’ complaint history. Although the University’s 1996 disciplinary action resulted in Strauss’ permanent removal from Athletics and Student Health, his status as a tenured faculty member remained unaffected.

We also find that—following the University’s disciplinary action against Strauss—while he was still employed as a tenured professor in the School of Public Health, Strauss opened a private, off-campus “men’s clinic” where he continued to sexually abuse OSU students. During this period, Strauss persisted in protesting his removal from Athletics and Student Health to various University officials. Despite these efforts, Strauss was ultimately told in October 1997 that the University would not consider reinstating him as a physician in Athletics or Student Health. Shortly thereafter, Strauss determined that he would retire from the University.

Upon his voluntary retirement on March 1, 1998, Strauss received the “emeritus” honorific from OSU, which he maintained until his death in 2005.

A. Strauss’ Work as a Physician at The Ohio State University

In September 1978, Strauss was hired by OSU as an Assistant Professor in the College of Medicine. Within months, Strauss began volunteering with the University Athletics Department, specifically as a team physician for several teams based out of Larkins Hall—at that time, the University’s physical education building and aquatics facility. By 1980, Strauss was serving as an Associate Director of the Sports Medicine program, and in 1981, Strauss began an appointment in the Athletics Department, which included responsibilities at a Sports Medicine Clinic located in the University’s Student Health Services (then known as “University Health Services,” but also known as “Student Health Services” or “Student Health”).

Over the years, Strauss’ responsibilities as a team physician expanded beyond just the teams based out of Larkins, and included assignments with teams and in facilities across campus, such as the Woody Hayes Athletic Center, Ernie Biggs Athletic Training Facility, and St. John Arena. Additionally, Strauss treated patients at Student Health Services, although he did not have a formal appointment in Student Health until 1994 when he began a part-time appointment treating OSU students in a specialty Men’s Clinic that was located on the third floor of Wilce Student Health Center.

B. Complaints and Reports about Strauss’ Misconduct

Beginning as early as Strauss’ first year at OSU—and persisting throughout his nearly two decades at the school—students and University staff reported and referred complaints about Strauss to various University employees. As early as 1979, personnel in the University’s Sports Medicine program and Athletics Department were aware that Strauss was conducting genital examinations on male athletes that were unusually prolonged, and that Strauss refused to allow athletic training staff to be present for these protracted genital examinations. Additionally, from Strauss’ earliest involvement as a team physician at OSU, it was broadly known within the Athletics Department that Strauss showered alongside the male students at Larkins Hall—a practice unique to Strauss among the other team physicians and a practice that the student-athletes repeatedly complained about to their coaches.

From roughly 1979 to 1996, male students complained that Strauss routinely performed excessive—and seemingly medically unnecessary—genital exams, regardless of the medical

condition the student-patients presented. Despite the persistence, seriousness, and regularity of such complaints, no meaningful action was taken by the University to investigate or address the concerns until January 1996, following a cluster of student complaints that arose in the mid-1990s. Specifically:

- In November 1994, OSU’s Director of Sports Medicine and Head Team Physician completed a self-described “investigation” into complaints raised by male student fencers, concluding that the reports were based on “unfounded rumors.” Nonetheless, Strauss “voluntarily” stepped down as the fencing team physician and was replaced by another doctor. The Head Team Physician reported his findings to the Senior Associate Athletic Director, but the issue was not escalated beyond the Athletics Department. No report was made by the Head Team Physician, the Senior Associate Athletic Director, or by the University to the State Medical Board of Ohio (“Medical Board”) at that time.¹
- Less than two months later, in January 1995, two male patients (“Student A” and “Student B”) in the Student Health Men’s Clinic separately complained of sexual misconduct by Strauss, including inappropriate genital exams. Strauss denied impropriety. The University took no substantive personnel action against Strauss, although the Director of Student Health implemented a special patient intake form for the Men’s Clinic and a quasi “chaperoning” policy for Strauss. The Director of Student Health took no further action and did not escalate reports of the complaints beyond Student Health. Once again, no reports were made by the Director of Student Health or by the University to the Medical Board at that time.
- Roughly one year later, in January 1996, a third patient (“Student C”) of the Student Health Men’s Clinic reported that Strauss fondled Student C’s genitals and engaged in other misconduct during Student C’s medical examination. In this instance, the University took disciplinary action against Strauss. Within days, the Office of Human Resources placed Strauss on administrative leave and suspended him from providing clinical treatment to students at the University (both in Student Health and in Athletics).

After Strauss was placed on administrative leave in January 1996, the University’s Vice President of Student Affairs, together with the Associate General Counsel for Human Resources, began an investigation into Student C’s complaint (“Student Affairs Investigation”). During the Student Affairs Investigation, the November 1994 complaints from the fencing team and the two complaints brought in January 1995 against Strauss by Students A and B in Student Health were

¹ It was outside the scope of our fact-finding mandate to reach legal conclusions, including whether the University—or any University personnel—acted in accordance with applicable University policies or Ohio mandatory reporting laws in place at the time. Accordingly, without determining that the University—or any of its employees—were obligated to refer the fencers’ complaints about Strauss to the Medical Board, we determined—as a factual matter—that no such report or referral was made at the time.

brought to light. Strauss, for his part, retained counsel and threatened to take legal action against the University and against Student C.

On June 5, 1996, Student Affairs convened a closed-session disciplinary hearing concerning the sexual misconduct allegations, with participation limited to Strauss, Strauss' attorney, the Vice President of Student Affairs, and the Associate General Counsel for Human Resources. No students-patients were given the opportunity to participate. On August 5, 1996, Strauss was informed that, effective immediately, his appointment with Student Health Services would not be renewed. Separately, Strauss' employment agreement with the Athletics Department was terminated at the end of July 1996.

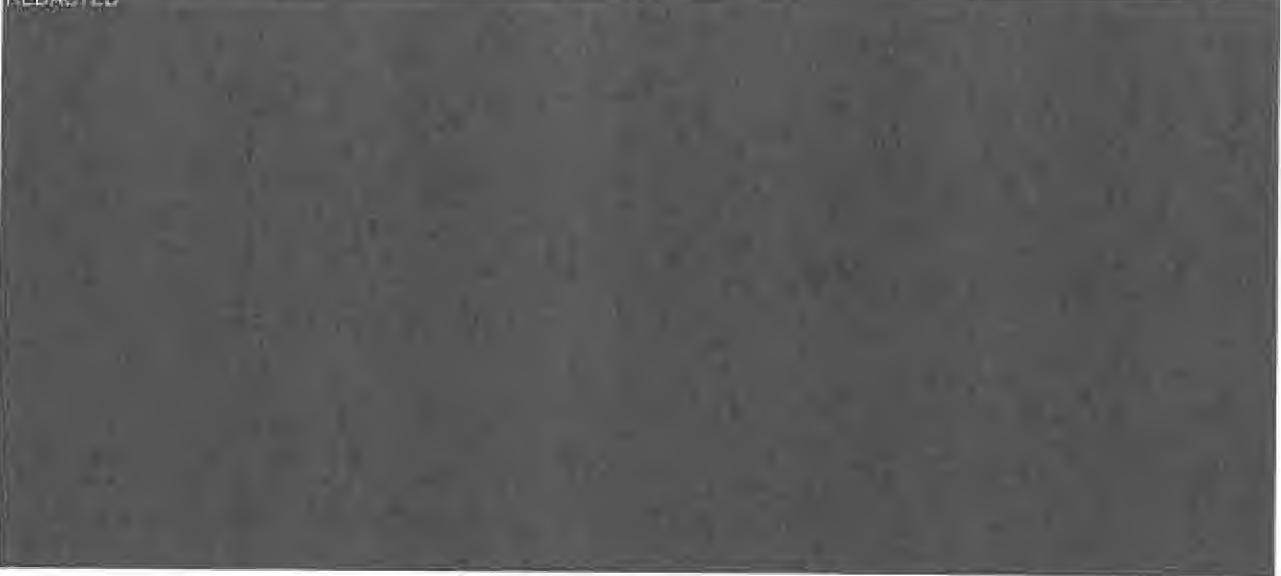
Despite the conclusions reached by the Student Affairs disciplinary process, and the subsequent termination of Strauss' activities as a University physician, Strauss' status as a tenured faculty member in the University's School of Public Health remained unchanged. Further, the School of Public Health never initiated or otherwise pursued its own investigation of Strauss; to the contrary, it recommended that Strauss receive an emeritus appointment upon his voluntary retirement from the University in 1998.

C. State Medical Board of Ohio's Investigations of Strauss and OSU²

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REDACTED
REDACTED In the end, Strauss retained his medical license
in Ohio until its eventual expiration on September 30, 1998.

² The Medical Board did not permit Perkins Coie to interview any of its current or former employees, citing Ohio statutory confidentiality provisions governing the contents of its investigative files.

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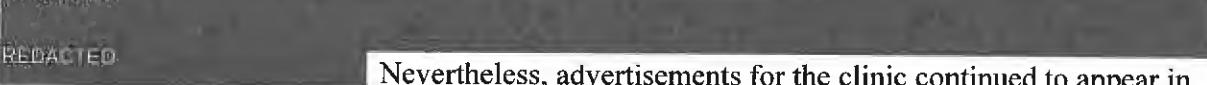


D. Strauss' Off-Campus Private Men's Clinic

In September 1996—within a few weeks of Strauss' removal as a University physician—Strauss opened an off-campus private “men’s clinic” in Columbus that purported to specialize in sexually transmitted diseases and urological issues. Prior to opening the clinic, in mid-July 1996, Strauss received assurances from the Associate Vice President of Health Sciences and Academic Affairs that there would be no issue with Strauss engaging in part-time private medical practice while retaining his tenured faculty position at the University. The Associate Vice President was aware, at the time he provided these assurances to Strauss, that Strauss was being investigated by Student Affairs following a complaint brought against Strauss by a student-patient.

Strauss employed OSU nursing students at the private clinic, advertised for the clinic in OSU’s student newspaper of record (*The Lantern*) with the promise of a “student discount,” and encouraged OSU student-athletes to come to his private clinic for treatment. Strauss continued to commit acts of sexual abuse on the student-patients he treated at his private clinic.

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Nevertheless, advertisements for the clinic continued to appear in *The Lantern* until February 13, 1997. The Investigative Team did not identify any evidence establishing that anyone from the University intervened to stop Strauss’ advertisements in *The Lantern*.

E. Faculty Retirement and Emeritus

Following the outcome of the 1996 Student Affairs Investigation, from roughly February 1997 until October 1997, Strauss undertook numerous efforts to appeal the decision within the

University administration and to seek reinstatement as a physician at OSU. Strauss appealed (both formally and informally) to various University officials, up to and including the Office of the University President. However, in early October 1997, Strauss was informed that the University would do nothing further on his case. Later that same month, Strauss notified the Acting Director of the School of Public Health of his intention to retire from the University.

On October 30, 1997, the Acting Director of the School of Public Health sent a memorandum to the Dean of the College of Medicine and Public Health regarding Strauss' intention to retire. Even though the Acting Director was aware that Strauss had been disciplined by Student Affairs following a student complaint regarding an inappropriate genital examination, the Acting Director recommended that Strauss receive emeritus status upon retirement "based on his long-standing service, commitment, and national and international achievements." There was no reference to, or acknowledgement of, the complaint against Strauss in the Acting Director's memorandum to the Dean.

On January 22, 1998, the Associate Vice President of Health Sciences and Academic Affairs (who simultaneously served as the Vice Dean of the College of Medicine and Public Health) submitted a memorandum to the Vice Provost of the University stating that the "Appointment, Promotion, and Tenure Advisory Committee of the department and the college recommended Strauss for an emeritus appointment," and requesting support for Strauss' emeritus appointment. At the time the Associate Vice President/Vice Dean submitted the memorandum to the Vice Provost, he was aware that Strauss had been disciplined by Student Affairs following a student complaint regarding an inappropriate genital examination, but he made no mention of it in the memorandum.

Effective March 1, 1998, Strauss was allowed to voluntarily retire from OSU, and the Board of Trustees approved Strauss' honorific appointment as Faculty Emeritus in the University's School of Public Health. However, on March 17, 1998, the Dean of the College of Medicine and Public Health indicated in handwritten notes that she "had not approved" Strauss' emeritus status and "was not told" about the recommendation until after the Board of Trustees meeting. It remains unclear how Strauss' emeritus appointment was sent to the Board of Trustees without the approval of the Dean, and whether the Dean's apparent objection to Strauss' receiving the emeritus honorific was based on procedural concerns, concerns arising from the Student Affairs disciplinary action against Strauss, or other concerns. Regardless, the emeritus appointment was never withdrawn or otherwise reversed.

F. Report Overview

The Report sections that follow summarize the factual findings reached by the Independent Investigation, based on a preponderance of the evidence ("more likely than not") standard.

Sections II and III of the Report, respectively, describe the scope of our investigative mandate and the workplan undertaken to reach the factual findings contained in the rest of the Report.

Section IV contains a detailed description of the various roles Strauss served at the University, including his faculty position in the College of Medicine and the School of Public Health, the University Athletics Department, Student Health Services, and OSU Medical Center/University Hospitals.

Section V provides a summary of our findings regarding Strauss' sexual abuse of OSU students, including student-athletes, student-patients of the Student Health Center, and student-participants in Strauss' medical studies. It also reports findings with respect to Strauss' interactions with high school and grade school students. Lastly, it discusses Strauss' establishment of an off-campus private men's clinic following his removal as a practicing physician at OSU, and his continued sexual abuse of the students he treated there.

Section VI describes evidence reflecting the University's knowledge of concerns and complaints about Strauss, including when the concerns were raised, to whom they were raised, and what, if anything, was done to address them.

Finally, Section VII addresses additional investigative findings that are not necessarily specific to Strauss, but are nevertheless relevant to the Independent Investigation. First, it describes the "sexualized" environment that existed in Larkins Hall from the early 1980s into the late 1990s, including predatory elements of voyeurism and public indecency to which students were subjected. Second, it describes the various University policies and procedures governing student grievances and employee misconduct that were in effect during the relevant time period.

II. INVESTIGATIVE MANDATE

A. Structure and Scope of Independent Investigation

The defined scope of the Independent Investigation was, first, to evaluate allegations that Strauss committed acts of sexual misconduct against members of the OSU community while he was employed by the University, and, second, to determine whether "the University" had knowledge of sexual misconduct allegations against Strauss during the relevant time period.

We were explicitly retained to only reach factual findings, and not to draw legal conclusions. Relatedly, we were not asked to assess or otherwise provide recommendations to the University regarding its current or historical policies, procedures, or practices related to sexual abuse or sexual misconduct. Although our professional fees and expenses were paid by the University, we provided no legal advice to the University. Finally, throughout the Investigation, we referred media inquiries pertaining to the Independent Investigation to the University or to Porter Wright, as appropriate.

The Investigative Team was led by two partners in Perkins Coie's White Collar & Investigations practice group: Markus Funk—a former federal prosecutor, and Caryn Trombino—a former federal government ethics attorney. The lead partners each have significant experience conducting investigations that specifically involved male survivors of sex abuse, in addition to expertise in how to employ a trauma-informed/survivor-centered methodology when investigating cases of sexual abuse and exploitation. Accordingly, the Investigative Team employed a trauma-informed/survivor-centered methodology in the Independent Investigation, as described further below.

1. Statement of Independence

a. Investigative Process

The Investigative Team developed the investigative workplan independently—without direction from the University—and executed the workplan without interference or obstruction by the University. To the extent that we asked the University to assist with certain discrete investigative tasks, as described below, the University made concerted efforts to accommodate us throughout the entirety of the Independent Investigation. For example, the University provided the Investigative Team with complete access to University records, and to current University personnel, as we carried out our investigative workplan. The University placed no restrictions on the Investigative Team as we pursued evidentiary leads that we deemed essential to achieving our mandate.

At our request, the University also provided significant assistance to the Investigative Team as we undertook efforts to identify and locate former University personnel who we believed might have information relevant to the Investigation. When we encountered difficulty in getting a number of former University employees to respond to our requests for interview, the University—through letters sent by Porter Wright—encouraged those former employees to cooperate.

Additionally, following extensive efforts by the University, the Ohio Attorney General's Office, and Porter Wright to assist the Investigative Team in obtaining copies of any materials relating to Strauss from the State Medical Board of Ohio, on December 4, 2018, the Medical Board produced materials responsive to Porter Wright's request for records of complaints to the State Medical Board by or against Strauss. **REDACTED**

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R As discussed further in this Report, the Medical Board files contained substantial documentary evidence relevant to our investigative mandate.

b. Investigation Timeline

Due to the broad scope of our investigative mandate—made exponentially more complex by the historical nature of the conduct in question, the resulting limitations in availability of numerous key witnesses and records, and the inherently personal and sensitive nature of the

subject matter—the Independent Investigation was not conducted pursuant to a pre-determined deadline. Nevertheless, through the entire duration of the Investigation, we worked as expeditiously as possible, and were allowed to draw on all necessary resources.

Although we provided Porter Wright and the University with regular updates regarding the status and progress of our Investigation, given a multitude of unpredictable developments in critical evidentiary leads, our estimated timeline for completion necessarily evolved over time.

c. Report of Factual Findings

As contemplated at the outset of the Investigation, we were asked to deliver our factual findings to the University, through Porter Wright, at the conclusion of our Investigation. The University did not participate in determining the content of this Report, beyond engaging in discussions with the Investigative Team and Porter Wright concerning the scope of the Report, prior to the drafting phase. The University was not provided with an advance draft copy of this Report.

We think it is important to note that, although this Report is significant in length and dense in factual content, it does not describe every allegation, witness account, or documentary record that we identified in the Independent Investigation. Rather, reflecting our professional judgment, this Report identifies and addresses the critical pieces of evidence that support our factual findings.

2. Identification of University Personnel

We have identified in this Report (by name) any individuals who held administrative positions at the University (i.e., Assistant Directors, Directors, and higher) and who either admitted, or were alleged to have, some level of knowledge or awareness of Strauss' sexually abusive acts with OSU students. We did so based on our view that their elevated position within the University hierarchy necessitated the highest level of transparency with respect to both the allegations (or admissions) we received concerning their knowledge, and our assessment of the entirety of the evidence we gathered concerning their alleged knowledge.

Other individuals who did not meet that threshold are identified by name to the extent that they were referenced in contemporaneous documentary evidence—sourced from the University's public records—relevant to the findings contained in this Report. Because these individuals were already identified by name in relevant public records, we determined that there was no reason not to identify them by name in this Report.

Lastly, with respect to any individuals who did not meet either of the above two thresholds, we decided against identifying them by name. Our reasons were twofold: first, an exhaustive accounting of every allegation that we received concerning “University knowledge”—at all levels of personnel—would have reached the same factual conclusions that we reached here, but would have significantly extended the length of this Report and, possibly, the timing of the Investigation itself; second, and relatedly, in many cases we could not reach

conclusive determinations concerning a particular individual’s knowledge, given conflicting witness accounts and the attrition of witness recollection, overall. Instead, our Report provides a comprehensive summary of the most salient or broadly corroborated witness accounts regarding “University knowledge,” with a particular focus on evidence contained in contemporaneous documentary records.

3. Conditions of Witness Interviews

At the outset of each witness interview conducted by the Investigative Team, we explained the structure of our engagement, our investigative mandate, and the fact that, although we are attorneys, we were not attorneys for the witness. We never prohibited or otherwise objected to the participation of a witness’ personal attorney in an Investigation interview. If we learned that a witness was represented by counsel, we thereafter directed our communications to their counsel. We also informed each witness that we would be taking attorney notes of our discussion, but that we were not otherwise recording the interview. In a handful of cases, a witness requested that the interview be audio-recorded (or a witness informed us that they were audio-recording our discussion).

If a witness was a former student or other individual reporting their account of abuse committed by Strauss (“survivor”), we informed the survivor that we would not share his name or other identifying information with the University (or any other third party), and that we would do everything in our power to ensure that the survivor’s identity would be kept confidential.³ We cautioned each survivor that, should we ever be compelled to reveal confidential information pursuant to a court order, we would need to comply with such an order. We only proceeded if the survivors indicated their understanding of, and consent to, these conditions. Upon request by certain survivors, we assigned aliases to further protect their anonymity, even within our internal work product.

In some cases, survivors elected to speak publicly about their experience, including through communications to various current University officials and communications with the media. In another small handful of cases (for example, Students A, B, and C discussed in this Report), the University learned of the names of survivors from contemporaneous documentary records that we uncovered through our efforts in searching the University Archives, or in the investigative file on Strauss that the State Medical Board of Ohio (“Medical Board”) eventually produced in December 2018.

In a few cases, some of which are discussed further in this Report, former University employees demanded certain “pre-conditions” in exchange for their participation in an interview with the Investigative Team. For example, some former University employees demanded to see written questions or copies of potentially relevant documentary evidence in advance of

³ With respect to other Investigation witnesses—including former and current University employees—we did not provide any assurances concerning their confidentiality or anonymity.

participating in—or even agreeing to—an interview with the Investigative Team.⁴ We did not comply with any such pre-condition, as doing so would have compromised the integrity of our Investigation, including our ability to assess the witness' credibility and independent factual recollection.

B. Trauma-Informed/Survivor-Centered Methodology

1. Working Definition of Doctor-Patient Sex Abuse

This case presented an intersection of two specific types of sexual abuse, both of which have generally *not* been associated with common social conceptions of sexual abuse. Specifically, this case involved doctor-patient sexual abuse and the sexual abuse of adult males.⁵

With the understanding that both (1) doctor-patient sex abuse and (2) adult male sex abuse have been historically underrepresented and/or unexamined in the broader social discourse surrounding sexual abuse, we undertook this Investigation informed by the following:

- Patients often do not report sexual abuse committed by their doctors due to feelings of shame, fear of not being believed, and confusion as to whether sexual abuse, in fact, occurred.⁶ Studies have also revealed that most survivors of doctor-patient abuse do not report sexual violations; one study determined that fewer than one in ten patients choose to report such abuse.⁷
- Male survivors of sex abuse often experience shame or self-doubt about the involuntary physiological arousal that can result from unwanted or unexpected sexual touching (i.e., erection or ejaculation), contributing to a fear of reporting such abuse due to related social stigmatization.⁸

⁴ Some former employees also demanded that the University pay their attorneys' fees and/or indemnify them before they would agree to be interviewed. Special Counsel to the University informed those individuals that the University was not permitted to do so under state law governing the indemnification of current or former employees.

⁵ As discussed in the Report, the case also included accounts of sexual abuse of OSU students who had not yet reached the age of 18, as well as allegations regarding abuse of high school and grade school-aged children.

⁶ A national investigation (and follow-up investigation) conducted by *The Atlanta Journal-Constitution* (“AJC”) in 2016 and 2018 uncovered 450 cases of doctors who were brought before medical regulators or courts for sexual misconduct or sex crimes in 2016 and 2017. The AJC found that, in nearly half of those cases, the doctors remained licensed to practice medicine, regardless of whether the victims were “patients or employees, adults or children.” The AJC investigation concluded that, in the United States, victims of doctor sexual abuse are often not believed, criminal charges for physician sex abuse are rare, and medical licensing boards tend to offer rehabilitation and a return to practice. Carrie Teegardin & Danny Robbins, *Still Forgiven*, ATLANTA J.-CONST. (Apr. 26, 2018), http://doctors.ajc.com/still_forgiven/?ecmp=doctorssexabuse_microsite_nav; see also J.M. DuBois et al., *Sexual Violation of Patients by Physicians: A Mixed-Methods, Exploratory Analysis of 101 Cases*, SEXUAL ABUSE (June 2017), <https://journals.sagepub.com/doi/pdf/10.1177/1079063217712217>.

⁷ J.M. DuBois et al., *Sexual Violation of Patients by Physicians: A Mixed-Methods, Exploratory Analysis of 101 Cases*, SEXUAL ABUSE (June 2017), <https://journals.sagepub.com/doi/pdf/10.1177/1079063217712217>.

⁸ A peer-reviewed study published in the *American Journal of Public Health* in 2014 found that, despite statistical evidence of widespread sexual victimization among men in the United States, it is frequently minimized in our

- A common myth surrounding male sex abuse—and one that we repeatedly encountered in this Investigation—is that a male should be “strong enough” to physically fight off the perpetrator.⁹ These expectations—both internal and external to a survivor—can be a significant contributing factor to his decision not to report abuse. Among other misconceptions, this myth ignores the inherent power imbalance (and related credibility imbalance) that can exist in a relationship—particularly the power/credibility imbalance between a doctor and his patient—as well as the potential criminal repercussions that could result from a patient responding aggressively to his doctor.

Notably, in at least the one case we identified where a student-patient responded with anger and some physicality to Strauss’ abusive genital exam (Student C), Strauss repeatedly accused the student of “assaulting” him.

2. Consultations with External Physicians

In the vast majority of the survivor accounts we received, Strauss’ acts of physical sexual abuse occurred in the context of a student’s purported medical examination. In order to discern whether, and to what extent, Strauss’ physical examinations of student-patients exceeded the boundaries of what was appropriate or medically necessary, it was essential for the Investigative Team to consult with suitably qualified medical experts. To that end, Perkins Coie conducted a nationwide search for medical experts who met three essential criteria: (1) no affiliation with The Ohio State University; (2) significant experience serving as team physicians at the intercollegiate level; and (3) ability to speak to the prevailing medical practices applicable during the relevant time period. Ultimately, we retained two eminently qualified external physicians (“External Physicians”) with whom we consulted in preparing our factual findings.¹⁰ The External Physicians’ curricula vitae are attached as Exhibits A and B to this Report.

We also received survivor accounts of sexually abusive examination techniques by Strauss—such as sexually charged commentary or medically unnecessary questioning regarding a student-patient’s sexual practices or sexual performance—about which we consulted with the External Physicians. Additionally, we consulted with the External Physicians regarding accounts concerning Strauss’ conduct outside of a medical examination context—such as showering and otherwise fraternizing with the OSU student-athletes for whom he was a team physician. Outside the context of a doctor-patient relationship, such behavior might be described as “sexual harassment,” but given the context of Strauss’ doctor-patient relationship with the relevant

⁹ social discourse and rarely criminally prosecuted. L. Stemple et al., *The Sexual Victimization of Men in America*, 104 AM. J. PUB. HEALTH 945 (June 2014).

¹⁰ *Sexual Assault of Men and Boys*, RAPE, ABUSE & INCEST NAT'L NETWORK, <https://www.rainn.org/articles/sexual-assault-men-and-boys>.

¹⁰ The External Physicians did not participate in witness interviews conducted by the Investigative Team. Rather, we presented anonymized survivor accounts to the External Physicians for their analysis and input.

students, we found that he exploited the doctor-patient power dynamic¹¹ and, thus, that the behavior was sexually “abusive.”

3. Credibility of Survivor Accounts

With rare exception, we found the survivor accounts concerning their experiences with Strauss to be both highly credible and cross-corroborative. Regardless of whether survivors attended OSU in the late 1970s or in the early 1990s, or whether they were student-athletes on the football team or non-athlete students treated by Strauss in the Student Health Center, their descriptions of Strauss’ conduct were remarkably similar. Despite this consistency, the details contained in their individual accounts were unique and did not bear indicia of being “copycat” or coordinated, scripted stories.¹² Adding further credibility, and as explained in this Report, the accounts of abuse were corroborated both by contemporaneous records we located in the Independent Investigation, as well as statements from other Investigation witnesses, including University employees and staff.

Many, if not most, of the men who contacted us did so with great hesitation—many stated that they did not want to cause harm to the University, others told us that they did not want to relive past traumatic experiences that they had tried to put behind them, and some questioned the value of investigating Strauss now, given he is no longer alive. In many instances, however, these men explained to us that their own children are now college-aged and that they wanted to help ensure that something “like this” never happened at OSU, or at any institution, again.

Unless there was an essential need for a follow-up interview, we endeavored to limit our interviews of survivors to a single instance so as to not needlessly repeat what was, in many cases, an emotionally demanding experience for the interviewee.

4. Survivor Outreach

Despite our best efforts to minimize the potential re-traumatization of the survivors who participated in the Investigation, in several respects, we had to balance a survivor-centered approach with our need to conduct a factual investigation. Consequently, to meet our investigative mandate, it was necessary to obtain detailed firsthand accounts from survivors, whenever possible. We are grateful to each survivor who agreed to speak with us—in many cases, sharing painful and personal experiences about which he had never previously spoken.

When faced with the difficult task of identifying potential survivors who might have information relevant to our investigation, we determined that proactively contacting individual former students, one-by-one, would be incompatible with our trauma-informed approach for a

¹¹ The outsized doctor-patient power dynamic was exacerbated by the fact that—as a team physician for the University—Strauss possessed the authority to affect a student-athlete’s ability to compete in athletics at OSU.

¹² To better safeguard against the possibility of “copycat” accounts, the Investigative Team did not publicly share any details gathered from survivor accounts prior to the completion of this Report.

variety of reasons.¹³ First, we were sensitive to the fact that, depending on the year that the survivor attended OSU, the survivor’s last contact with Strauss was approximately 20 to 40 years ago. Even among the survivors who determined, on their own, to contact us, many explained that revisiting the details of their experiences with Strauss was enormously difficult and brought to surface painful memories that they had attempted to move past during their adult lives. Some individuals, even after initially contacting us, later decided that they did not want to participate in an interview.

At bottom, the fundamental guiding principle in trauma-informed methodology is to respect the survivor’s autonomy and control. We felt strongly that it would be inappropriate for us to proactively contact former students individually to ask them if they had been sexually abused by Strauss.¹⁴ Such an approach would have violated that person’s autonomy and carried with it a significant risk of re-traumatization.¹⁵ While we do not discount the possibility that there are some survivors who would have preferred that we contact them individually, we note that there are a number of survivors who were aware of the Independent Investigation and yet decided *not* to contact the Investigative Team about their experiences with Strauss.¹⁶ It was, in our view and experience, essential to the survivor-centered methodology that such a decision was—in accordance with best practices—left to each individual survivor, and not to us.

¹³ We immediately became sensitized to this issue after initially contacting a former student whose name was provided to us by another survivor as someone who experienced Strauss’ sexual abuse. We did so on the mistaken belief that the former student had consented to have his information provided to us by the referring survivor. However, when we spoke to the former student in question, he informed us that he had *not* given permission to the referring survivor to have us contact him.

¹⁴ Our perspective on this topic is not unique to us. Many authoritative sources underscore the importance of respecting a survivor’s autonomy when investigating allegations of sex abuse. See, e.g., Melissa Milam, Nicole Borrello, & Jessica Pooler, *The Survivor-Centered, Trauma-Informed Approach*, 65 U.S. ATTORNEY’S BULL. 39, 40 (2017) (“It is important to restore feelings of self-efficacy and control to [survivors] by providing them with opportunities for choice and consistency [when it comes to being interviewed]”); INT’L ASS’N OF CHIEFS OF POLICE, *Sexual Assault Incident Reports: Investigative Strategies*, at 4–5 (“Help [survivors] gain back a sense of control by involving them in the decision of when and where to hold the interview. . . . Do not pressure the [survivor] to make any decisions regarding participation in the investigation or prosecution during the initial interview . . . or initial stages of the investigation. Sexual assault [survivors] are often reluctant to actively participate with case proceedings.”), available at

<https://www.theiacp.org/sites/default/files/all/s/SexualAssaultGuidelines.pdf> (last visited May 14, 2019); HON. VIRGINIA KENDALL & T. MARKUS FUNK, CHILD EXPLOITATION AND TRAFFICKING 260–62 (2d ed. 2017) (“[E]ach interview re-victimizes the [victim] to the extent that she is repeating and reliving the traumatic experience. . . . To the extent possible, the interviewer should allow the victim to control the direction of the interview”).

¹⁵ On that point, we were contacted by some former students who were deeply distraught after being “cold-called” by members of the media seeking to confirm whether the former students had been sexually abused by Strauss. Moreover, we were repeatedly told by former students that it was of critical importance to them that they were participating in this Investigation on their own terms.

¹⁶ In a small number of cases, individual survivors self-identified themselves via public statements. In those limited cases, we contacted the individuals to confirm that they were aware of the Independent Investigation and to invite them to participate in an interview with the Investigative Team. Some individuals accepted the invitation and others declined or did not respond.

Instead, we worked with the University to undertake a broader outreach approach to the University community as a whole, in addition to providing a regular cadence of public updates that received national media attention. The Independent Investigation received a significant amount of media coverage, with over 6,800 unique articles appearing in media outlets from April 1, 2018, until the end of March 2019, including in major national news outlets outside of the greater Columbus area.

The following outreach actions were taken to publicize the Independent Investigation and to provide persons with information the opportunity to come forward:

- University news releases on April 5, 2018, May 3, 2018, June 7, 2018, July 20, 2018, August 16, 2018, August 30, 2018, September 7, 2018, and November 15, 2018.
- Campus-wide email communications from University President Drake on May 3, 2018, June 7, 2018, July 20, 2018, November 15, 2018, and February 1, 2019. The distribution list for the campus-wide email communications included approximately 140,000 recipients.
- Email from President Drake to alumni on May 21, 2018, and February 1, 2019, and to former student-athletes on June 12, 2018, and February 1, 2019. The distribution lists for President Drake's emails were targeted to all alumni (approximately 112,600 recipients) and former student-athletes (approximately 5,000 recipients) who were at Ohio State during Strauss' time.
- A designated link on the Ohio State homepage to a Strauss Investigation webpage including a summary of the investigation, support resources, links to all public updates, and information on how to reach our Investigative Team.

In addition to the above efforts undertaken by the University, the Investigative Team created an email account (osu@perkinscoie.com) to receive communications from individuals with information related to our investigation. We assigned a dedicated staff resource to monitor the communications and endeavored to respond to individuals within one business day. We also provided survivors with information regarding Ohio State's Sexual Misconduct Reporting and Resources, as well as information regarding Ohio State's confidential support services through Praesidium.

C. Mandatory Reporting Obligations Under Ohio Law

As noted above, it was outside the scope of our fact-finding mandate to make a legal determination as to whether the University, or any University personnel, acted in compliance with the state-level mandatory reporting laws that were in effect in Ohio during the years that Strauss was employed at the University. However, for purposes of ensuring that our investigative workplan was appropriately tailored to capture any potential reporting channels that may have been utilized during the relevant time period, we conducted research to identify the

relevant reporting laws in place at the time. Our research included the identification of physician reporting requirements under the Medical Practices Act, Ohio Rev. Code ch. 4731, which had, over the years, imposed reporting requirements on both physicians and associations of physicians, as well as the chief administrator or executive officer of health care facilities including hospitals, ambulatory surgical centers, and other similar facilities.¹⁷ We also considered mandatory reporting laws applicable to the sexual abuse of minors (under 18 years of age),¹⁸ as well as statutes prohibiting child endangerment,¹⁹ and classifying the failure to report knowledge of a felony.²⁰

To the extent that we identified any evidence that the above-described reporting channels were used by the University, or any University personnel, relative to Strauss, such evidence is described in this Report.

III. INVESTIGATIVE WORKPLAN

A. Witness Interviews

The realities of investigating “historical” conduct—as opposed to conduct that occurred within the last two decades—presented numerous logistical and practical challenges. The challenges we encountered are discussed in detail below, but one pertinent example is that there was no single “automated” way for us to comprehensively identify University officials and staff who were employed at OSU during the relevant time period. In other words, there was no centralized database by which we could easily retrieve personnel data or documents such as organizational charts. Generally, we were only able to obtain such information by piecing together information that was dispersed across various records that we found in places such as the University Archives, or information that we obtained in witness interviews.

Excluding the Investigation witnesses (including survivors) who contacted us on their own, we identified approximately 500 individuals who we believed might have information relevant to determining the “University’s knowledge” of Strauss’ sexual abuse of student-patients. It is important to note that we did not have reason to believe that each of these witnesses had knowledge of Strauss’ misconduct; rather, in many instances, the interviews dealt with ancillary issues important to the Investigation, such as historical institutional practices or organizational structures, relevant to the allegations.

Once we identified potentially relevant witnesses, the next step was to find them. Only 53 of the approximately 500 individuals we sought to interview were still employees of the

¹⁷ See generally Ohio Rev. Code Ann. § 4731.224(A). The Act first incorporated physician reporting requirements in amendments passed in 1986. See Am. Sub. H.B. No. 769, at 5852–53 (Ohio eff. Mar. 17, 1987).

¹⁸ See generally *id.* § 2151.421. As of 1978, individuals required to report child abuse included physicians, hospital interns, residents, nurses, and any “other health care professional.” See Am. Sub. H.B. No. 219, at 2110–13 (eff. Nov. 1, 1977).

¹⁹ See. Ohio Rev. Code Ann. § 2919.22 (“Endangering Children”).

²⁰ See *id.* at § 2921.22 (“Failure to Report a Crime”).

University at the time of their interview with the Investigative Team (“current University employees”). The vast majority of potentially relevant witnesses we identified were no longer employees of the University (or, in some cases, were never employees of the University); accordingly, we undertook extensive efforts to locate and secure interviews with these individuals. Our efforts were assisted by the University as well as by Axium Consulting LLC, an investigative services firm that specializes in conducting background investigations. Perkins Coie retained Axium to assist us with various investigative tasks throughout the Investigation.

Because the nearly 500 additional witnesses we identified for interviews were not currently University employees—or, in some cases, were never employed at OSU—we had no power to compel them to participate or otherwise cooperate with the Independent Investigation. Of the approximately 500 witnesses, 70 never responded to our outreach attempts, 39 declined to participate in an interview, and 60 were deceased. We found that a handful of other witnesses were at a notably advanced age (late 80s or 90s) or had experienced significant health complications (e.g., stroke, dementia, Alzheimer’s) such that their ability to meaningfully participate in an interview was severely limited or—practically speaking—impossible.

Finally, as noted above, we did not attempt to proactively contact survivors on an individual-by-individual basis. We did, however, proactively contact former students who we believed might have potentially relevant information regarding the question of the University’s knowledge of complaints about Strauss, such as former student employees in University Athletics.

In sum, our Investigative Team completed interviews with 520 individuals, generally categorized²¹ as follows:

Number and Category of Witnesses Interviewed

Witness Category	Number Interviewed
Students Reporting Strauss’ Abuse (i.e., “Survivors”)	177
Other Student Witnesses	94
Former University Employees	169
Current University Employees	53
Third Party/Non-OSU Witnesses	27
Total	520

²¹ These categorizations required some exercise of judgment on our part, as certain individuals spanned multiple categories (e.g., witness was a student during the relevant time period but is currently a University employee).

Several key witnesses agreed to be interviewed multiple times, as needed; accordingly, we conducted approximately 600 interviews with 520 interviewees.

B. Document Collection and Review

At the outset of the Independent Investigation, in coordination with the University, the Investigative Team assessed the availability of existing University records from the time period contemporaneous to Strauss' employment at the University. The Investigative Team independently developed document and information requests and then worked with the University to search for any existing records responsive to those requests, as described below. Once any potentially relevant records were collected, the Investigative Team subsequently reviewed those materials for relevance, and incorporated them into our investigative workplan and factual findings, as appropriate.

The Investigative Team conducted both on-site review of materials stored at the University Archives, as well as remote review of records that were scanned by a third-party vendor retained by the Investigative Team, and then uploaded to our electronic discovery database. In total, the University provided the Investigative Team with access to more than 825 boxes of hardcopy records, comprising nearly 3,400 separate folders.

In addition to the materials collected from the University, the Investigative Team also requested and collected relevant records from a number of sources outside the University, as described further below.

From these collective efforts, the Investigative Team reviewed over 30 gigabytes of data.

1. University Records

Given the historical nature of the conduct in question—roughly 1978 to 1998—the relevant contemporaneous records we located were primarily from the “pre-digital” era. To the extent that electronic records were utilized during that time period, we were unable to recover material that still existed in a native, electronic form.²² Rather, our document collection efforts focused on identifying potentially relevant evidence from the University offices and departments with which Strauss was affiliated, and—to a far greater degree—searching the vast hard copy inventories of the University Archives.

To the extent that email communications were utilized by University personnel during the relevant time period, we were only able to locate a minimal amount of pertinent email correspondence which had been printed out in hard copy and archived at the University. We had

²² We recovered only one document relevant to the Investigation in native electronic form, which was located on an on-site document management system for the storage and classification of documents and email used by the University’s Legal Affairs group. The system serves as a central repository for the group’s documents. The Investigative Team also found a final hardcopy version of the same document in the University Archives.

greater success in locating relevant hard copy documentation, including memoranda and correspondence files, in our Archives searches, but we still encountered significant gaps in recordkeeping due to the passage of time.

a. Archival

The University Archives maintains historical records relating to the operations of the University. Some archived materials are maintained in accordance with legal requirements that apply to the records of a public institution, while others are maintained because they have historical, academic, or administrative value to the University.

The University Archives are organized topically by various colleges, departments, and divisions—for example, the College of Medicine, School of Public Health, and Pulmonary Diseases division each have archived records that were made available to the Investigative Team. Likewise, the University Archives maintains historical records for Athletics, as well as Student Health Services. Administrative records are also available through the University Archives, and the Investigative Team reviewed archived materials from the Office of the President and Student Services, among others.

Because archived records from the relevant time period were almost exclusively in paper form (some on microfilm or microfiche), and those records are generally not maintained in a “text-searchable” form, the Investigative Team was not able to conduct broad electronic searches across the University Archives to locate relevant documents. Accordingly, in some cases we identified specific categories of documents that would be of interest—i.e., “Strauss’ personnel file”—and the University was able to identify such records in its Archives and produce them to the Investigative Team. Primarily, however, the Investigative Team worked to identify potentially relevant collections within the Archives and then analyzed inventories of folder names contained within each collection. When we identified potentially relevant folders within a collection, the Archives team processed the entire folder for scanning and worked with our vendor to produce a digitized version of the folder to the Investigative Team.

Records that are not preserved in the Archives are generally maintained in accordance with the University’s Records Retention Guidelines (the “Guidelines”).²³ The Guidelines contain retention and destruction schedules for centralized University records, but also allow for the various colleges and departments to supplement the Guidelines with their own document retention schedules in accordance with University requirements and applicable regulations.²⁴ While the University periodically updated the Guidelines, it was consistently required that

²³ See, e.g., Ohio State Univ., Univ. Libr. & Univ. Archives, General Records Retention Schedule (Sept. 9, 2016) [CTRL00003594]; Ohio State Univ., Univ. Archives, Records Retention Guidelines for OSU (Mar. 27, 1996) [CTRL00003596]; Ohio State Univ., University Operating Manual: Record Retention & Disposition (July 1972) [CTRL00003597].

²⁴ See Ohio State Univ., University Operating Manual: Record Retention & Disposition (July 1972) [CTRL00003597] (“The department schedule will supplement the ‘General Schedule’ and will be unique for each department, school, college or division, etc.”).

records be maintained for a specified time period and then disposed of in accordance with the Guidelines.²⁵

b. Electronic

We also consulted with the University's Information Technology representatives regarding OSU's email system and electronic document storage environment. Through those exchanges, it was determined that the universe of relevant electronic records would be extremely limited due to the relevant time period at issue, and the subsequent passage of time.

The Investigative Team was informed that University faculty members were offered access to electronic mail beginning in about 1988. Through our consultations with the University, we determined that, although the University still retained some searchable email data for Strauss himself, the only remaining data in that account was from the time period of November 2010 to April 2016. Notably, this data post-dates Strauss' death.²⁶ Nonetheless, we reviewed the full contents of Strauss' mailbox, but did not identify any materials relevant to the Investigation.

Additionally, to confirm that we had not overlooked any potentially relevant email data, the Investigative Team provided the University with a list of approximately 50 current and former University employees/officials whom we identified as key witnesses over the course of our Investigation. The University, in turn, confirmed that no data from the relevant time period (approximately 1978 through 1998) existed for those custodians, for reasons attributed to the passage of time and the fact that the University's email systems underwent multiple upgrades over time. Although the University was able to locate email data for 14 of the relevant custodians, the email data all post-dates the period of Strauss' employment at OSU. Out of completeness, the Investigative Team reviewed this data for information potentially relevant to Strauss. To the extent that the data contained any information of relevance, it was incorporated into the investigative workplan.

c. Departmental

At the request of the Investigative Team, the University instructed various academic and administrative departments to search for materials related to Strauss that were stored within the

²⁵ See, e.g., Ohio State Univ., Univ. Archives, Records Retention Guidelines for OSU (Mar. 27, 1996) [CTRL00003596] (instructing that, “[g]enerally speaking, files about most employees are not required to be kept by employing units more than 5 years after termination of the employee.”); Ohio State Univ., Dept. of Athletics, Supplement to Records Retention Schedule (Sept. 30, 1992) [CTRL00003581] (requiring retention of student athlete medical files for “8 years after last activity or 8 years after student reaches the age of maturity, whichever later.”); Ohio State Univ., Univ. Health Servs., Student Servs. Division, Records Retention Schedule (June 8, 1977) [CTRL00003616] (requiring retention of student medical records for “10 years following last visit for care, then destroy as confidential.”).

²⁶ The University explained that Strauss' account inadvertently remained active after he died (i.e., “user” access still enabled), and that the oversight was subsequently corrected during a standard data audit in 2016.

departments, rather than in the University Archives. Specific requests for records were sent to the Office of the President, Ombuds Services, Office of Legal Affairs, Human Resources, School of Public Health, University Medical Center, Student Health Center, Student Affairs, and the Department of Athletics.

In response to those requests, most departments reported that they did not have responsive materials in their possession. However, the effort did identify a limited number of additional documents that had been maintained in the Office of Legal Affairs and in the Athletics Department.

We also worked with the OSU Police Department (“OSUPD”) to search for any police records relating to Strauss, specifically, as well as incident reports attributed to Larkins Hall. In terms of potentially relevant documentation, the OSUPD explained that it retained paper felony reports dating back to 1987 (with paper misdemeanor reports only dating back to 2007). The OSUPD made 55 boxes of paper records, as well as microfiche, available to the Investigative Team for review.

No OSUPD records relating to Strauss were identified. We did, however, identify a number of records relating to incidents at Larkins, as described further in this Report.

2. Other Institutions

The Investigative Team contacted the academic and professional institutions that Strauss was associated with prior to his employment at OSU, as well as the professional institutions where he served as a physician during the years he was employed at OSU. To the extent that these institutions shared information or provided documentation relating to Strauss, the materials generally consisted of personnel files confirming Strauss’ affiliation with those institutions.

We indicate below whether and to what extent an organization shared information or documentation pertaining to Strauss with the Investigative Team.

a. Academic Institutions and Military Service

Strauss’ medical career began in 1960, when he enrolled in the University of Chicago’s Medical School after graduating earlier that year from Michigan State University with an undergraduate degree in Chemistry.²⁷ Michigan State University was not able to locate any record of Strauss, although the University of Chicago was able to locate a copy of Strauss’ Michigan State University transcript from Strauss’ application for admission to medical school.²⁸ Documents located by the University of Chicago show that Strauss received his medical degree in 1964, after which he stayed in Chicago to complete a one-year internship at the University of

²⁷ Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000811].

²⁸ See Mich. State Univ., Transcript: Richard Harry Strauss [CTRL00002163].

Chicago Hospitals.²⁹ Strauss' internship at the University of Chicago Hospitals began in July 1964 and ended in June 1965.³⁰

Strauss' state medical licensure records show that he did not practice medicine from July 1965 through December 1965.³¹ Beginning in January 1966, Strauss served in the United States Navy as a Lieutenant in the Medical Corps.³² The National Personnel Records Center confirmed that Strauss served in the United States Navy from January 6, 1966, to July 26, 1968. The Strauss family assisted us in requesting copies of Strauss' military discharge files, which reflected an honorable discharge from his naval service.

Beginning in September 1968, Strauss participated in a two-year post-doctoral fellowship (ending August/September 1970) in Respiratory Medicine & Physiology at the University of Washington School of Medicine, where he also served as a physician for diving activities.³³ The University of Washington informed us that it was unable to locate any records related to Strauss.

From September 1970 until August 1972, Strauss taught as an Assistant Professor of Physiology at the University of Pennsylvania School of Medicine.³⁴ From September 1972 until June 1974, Strauss worked as an Associate Professor of Physiology at the University of Hawaii School of Medicine.³⁵ Both the University of Pennsylvania and the University of Hawaii located records confirming Strauss' employment at their institutions, but nothing more.³⁶

²⁹ Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265]; *see* Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; *cf.* Letter from Joseph Ceithaml to Wright Adams (Dec. 10, 1963) [CTRL00002161] (recommending Strauss for one-year internship at University of Chicago Hospitals).

³⁰ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477] (enclosing Strauss' Resume of Activities).

³¹ *Id.*

³² *Id.*; Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265].

³³ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477] (enclosing Strauss' Resume of Activities); *see* Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; Ohio State Univ., Coll. of Med., Faculty Roster Display Form: Richard Harry Strauss (Jan. 8, 1998) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265].

³⁴ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477] (enclosing Strauss' Resume of Activities).

³⁵ *Id.*; Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000812].

³⁶ *See* Univ. of Hawaii, Personnel Record: Richard H. Strauss [CTRL00003575] (confirming employment starting August 16, 1972, and resignation on July 31, 1975); Univ. of Pa., Exec. Bd., Meeting Minutes (Sept. 25, 1972) [CTRL00003561] (recognizing promotion of Strauss from Associate to Assistant Professor of Physiology in the School of Medicine); Univ. of Pa., Exec. Bd., Meeting Minutes (Nov. 10, 1972) [CTRL00003558] (recognizing Strauss' resignation effective September 17, 1972).

In July 1974, Strauss worked as a Medical Resident at Rutgers New Jersey Medical School (ending June 1975).³⁷ From July/August 1975 until June 1977, Strauss worked as a Research Fellow in Medicine at Peter Bent Brigham Hospital and Harvard Medical School.³⁸ And finally, from July 1977 until June 1978, Strauss worked as a Fellow in Sports Medicine at Harvard Medical School and the Boston Children’s Hospital.³⁹ Rutgers New Jersey Medical School informed us that it was unable to locate any records regarding Strauss. Harvard Medical School indicated that Strauss was at the institution from 1975 to 1977, and that it had “nothing further to report.” Brigham informed us that its “public affairs” had “already made a [public] statement” and “that would be all that [Perkins] would be getting from the Brigham.”⁴⁰ Lastly, Boston Children’s stated that Strauss was likely in a “combined training program” through which he would have trained at a number of “Harvard-affiliated” institutions. Boston Children’s indicated that Strauss was possibly “employed” at Brigham and credentialed at Boston Children’s “briefly” on a rotation. Boston Children’s, in response to our request, represented that it identified “no indication of any discipline or concerns” regarding Strauss.

On September 1, 1978, Strauss was appointed to the faculty at OSU,⁴¹ where he remained employed until his retirement on March 1, 1998.⁴² A detailed description of Strauss’ roles at OSU is provided, below, Section IV.

³⁷ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477] (enclosing Strauss’ Resume of Activities); Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00027627]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00049839].

³⁸ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477] (enclosing Strauss’ Resume of Activities); Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00027627].

³⁹ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477] (enclosing Strauss’ Resume of Activities); Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00027627]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00049839]. Strauss’ 1985 curriculum vitae listed “Harvard Medical School and Children’s Hospital,” which we believe was a reference to Boston Children’s Hospital.

⁴⁰ An article published June 21, 2018, reported that “[s]pokespeople for Harvard Medical School and what is now Brigham and Women’s Hospital said they couldn’t provide further information about Strauss’ work or whether any concerns were raised about him.” Kantele Franko & Collin Brinkley, *Other Universities Mum on Ties to Doctor in Ohio State Sex Abuse Inquiry*, ASSOCIATED PRESS, June 21, 2018, <https://www.chicagotribune.com/news/nationworld/ct-doctor-ohio-state-sex-abuse-inquiry-20180620-story.html>.

⁴¹ Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; see Memorandum from Ronald L. St. Pierre to Nancy Rudd (Jan. 22, 1998) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00027627]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00049839]; Letter from Michael E. Whitcomb to Manuel Tzagournis (Aug. 15, 1978) [CTRL00000265] (recommending Strauss’ appointment to the faculty of OSU’s College of Medicine); Letter from Michael E. Whitcomb to Richard Strauss (Apr. 21, 1978) [CTRL00000265] (making Strauss an offer for employment starting in September 1978).

⁴² Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265].

b. Olympic Committee Service

Concurrent with his employment at OSU, Strauss pursued a number of professional opportunities relating to the Olympics, as described below.

(i) USA Wrestling

Strauss' curriculum vitae indicated that from 1984 to at least 1996, he served as an international team physician with USA Wrestling, where he also served as the Vice-Chairman of Medical Services.⁴³ The Investigative Team contacted USA Wrestling to request any records relating to Strauss' involvement and was told that USA Wrestling was unable to locate any documentation or other information regarding Strauss.

(ii) United States Olympic Committee

Strauss' records also indicated that from 1984 to 1988, he served as a physician and "Crew Chief" in the United States Olympic Committee's ("USOC") Drug Control Program,⁴⁴ and that he worked at the 1984 Summer Olympic Games in Los Angeles as the Assistant Director of the UCLA Olympic Analytical Laboratory.⁴⁵ Strauss' records further indicated that he was a physician at the Pan American Games in the summer of 1987⁴⁶ and was invited to serve as a volunteer physician for the 1996 Summer Olympic Games in Atlanta.⁴⁷

The Investigative Team contacted the USOC to request materials relating to Strauss' involvement with the organization. In response, the USOC indicated that it conducted searches in the appropriate departments but was unable to locate records related to Strauss' involvement with the USOC's Drug Control Program in the 1980s; his claimed association with the 1987 Pan American Games in Indianapolis, Indiana; or the 1996 Summer Olympic Games in Atlanta, Georgia.

The Investigative Team separately contacted UCLA to request any information or materials relating to Strauss' service with the UCLA Olympic Analytical Laboratory during the 1984 Summer Games. UCLA indicated that it conducted a comprehensive review and was unable to find any existing documentation relating to Strauss.

⁴³ Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000813]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00027627]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00049839].

⁴⁴ See *id.*

⁴⁵ Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000813]; Ohio State Univ., Request for Supplemental Compensation: Richard H. Strauss (June 11, 1984) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00027627]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00049839]; Ginny Halloran, *Professor to Oversee Drug Testing at Olympics*, ONCAMPUS (July 12, 1984) [CTRL00000138].

⁴⁶ Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000813].

⁴⁷ Letter from Richard H. Strauss to Thomas E. Greter (Apr. 30, 1996) [RHS_000748–50] (indicating that he was selected to be a physician for the 1996 Summer Olympic Games and attaching a letter from the Chief Medical Officer confirming same).

(iii) International Olympic Committee

Finally, from 1989 until approximately 1997, Strauss served on a Publications Advisory Committee for the International Olympic Committee (“IOC”).⁴⁸ The IOC confirmed to the Investigative Team that Strauss was a member of the Publications Advisory Committee of the “Working Group for the Development of Future Volumes of the Encyclopedia of Sports Medicine” in 1989. The IOC noted that the Committee in question no longer exists and, due to the passage of time, the IOC had no additional information to provide to the Investigative Team.

With respect to Strauss’ potential involvement in the 1996 Summer Olympic Games in Atlanta, the IOC explained that the local organizing committees for each edition of the Olympic Games are independent organizations from the IOC.

c. Ohio High School Athletics Association and Columbus Area High Schools

As discussed further in this Report, the Investigative Team received allegations that, during his employment with OSU, Strauss was involved in certain activities involving high school and grade school-aged minors. We describe the steps we took to investigate these reports in Section V.F. Our related outreach included requests for information made to the Ohio High School Athletics Association and to various school districts in the Columbus area.

3. Miscellaneous Public Records

a. Litigation Records and/or Criminal History

The Investigative Team conducted public records searches for civil litigation or criminal records relating to Strauss in the various jurisdictions where he lived or where he applied for a medical license. These efforts included research in nationwide databases of federal and state criminal and civil case records, as well as available criminal and civil court records in pertinent state databases, where available. With the exception of some litigation records relating to Strauss’ divorce proceedings in 1985, Strauss was not identified as a party to any civil or criminal litigation.

⁴⁸ Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000813]. It is not entirely clear when Strauss served on the committee and what exactly the publications committee was called. Strauss’ resume suggests that it was the “Publications Committee for the Medical Commission,” while the International Olympic Committee reported that Strauss was a member of the “Publications Advisory Committee of the Working Group for the Development of Future Volumes of the Encyclopedia of Sports Medicine.” Moreover, while Strauss’ resume suggests he was on the committee from 1989 to 1997, the International Olympic Committee only confirmed he was on the committee in 1989.

Searches of statewide historical databases of criminal records, where available, yielded no arrest records for Strauss.⁴⁹ Additionally, the Franklin County Prosecutor's Office confirmed to the Investigative Team that there are no arrest records for Strauss on file with the Columbus Police Department. The OSU University Police also confirmed that it has no arrest records for Strauss.

b. State Filings

Although the scope of the Independent Investigation was limited to the time period of Strauss' employment at OSU, our search for public records relevant to Strauss was not limited by date restriction. Our findings are described below.

(i) Medical Licensure Records

In May 1978, Strauss applied for a medical license with the State Medical Board of Ohio.⁵⁰ His application indicated that he applied to each of the following State Examining and Licensing Boards "by reciprocity with [the] Nat[ional] Board": California (1965); Washington (1968); Pennsylvania (1970); New York (1971); Hawaii (1972); New Jersey (1974); and Massachusetts (1975).⁵¹ We were able to confirm that Strauss obtained medical licenses in all of these jurisdictions.⁵²

⁴⁹ Certain relevant jurisdictions—including California, Ohio, Massachusetts, New Jersey, New York, and Washington—either do not have historical databases for criminal records dating back to Strauss' lifetime or residency, require consent from the individual, or require the individual's fingerprints.

⁵⁰ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477].

⁵¹ *Id.*

⁵² Online records from Ohio's licensing authority indicate that Strauss was licensed in Ohio from July 11, 1978, to September 30, 1998. Online records from California's licensing authority did not reflect a license issued to Strauss in or around 1965, although they did indicate that Strauss was licensed in California on October 20, 1993. Our follow-up request to the California licensing authority determined that Strauss also had a California medical license starting on February 19, 1976 (with no disciplinary actions recorded); the 1976 California license appears to have lapsed or been canceled at an undetermined date, until Strauss received reinstatement of his medical license in California in October 1993. Online records from Washington confirm that Strauss had a medical license from August 12, 1968, through August 17, 2005. Online records from Pennsylvania's licensing authority indicate that Strauss was licensed in Pennsylvania from April 27, 1970, to December 31, 1972. Pennsylvania's State Board of Medicine also indicated that it no longer has any records for Strauss on file, as his license has not been active since 1972. New York's licensing authority confirmed that Strauss was licensed in New York beginning on May 25, 1971; he is listed as deceased as of August 17, 2005. Hawaii's licensing authority confirmed that Strauss had a medical license from October 3, 1972, until it was forfeited in the license period 1978–1980 due to Strauss' failure to renew the license. Online records from New Jersey's licensing authority indicate that Strauss was licensed in New Jersey on June 23, 1974, but do not list an expiration date. The licensing authority in Massachusetts confirmed via telephone that Strauss was licensed in Massachusetts on July 14, 1975, with no expiration date listed.

Strauss' application also indicated that his medical license had never been suspended or revoked in any foreign country or any state or territory of the United States,⁵³ and each relevant licensing authority confirmed as much. Nevertheless, the Investigative Team submitted written requests to each relevant state's licensing authority for additional information concerning Strauss' licenses, including any complaints that may not have resulted in disciplinary action. The licensing authorities in Ohio, Pennsylvania, and New York denied our requests for information, citing relevant state laws designating the information as exempt from public disclosure; New Jersey and Massachusetts did not provide a written response to our request but confirmed, telephonically, that only "final" board actions against a licensee are reported, and that no board actions were finalized against Strauss. The licensing authorities in California and Washington State responded only that they had no record of any disciplinary action taken against Strauss. The licensing authority in Hawaii indicated that since Strauss' license was forfeited more than ten years ago, it no longer had records pertaining to his license.

(ii) Strauss' Private Medical Clinics

Strauss operated two private medical clinics that purported to specialize in male genital and urological issues. Although both clinics were incorporated during Strauss' employment at OSU, they were unaffiliated with the University. A description of the public filings relating to each clinic are provided below.

(a) "Men's Clinics of America" in Columbus

Strauss' off-campus men's clinic in Ohio was called the "Men's Clinics of America" and was located at 1350 West Fifth Avenue in Columbus. On April 2, 1996, the Ohio Secretary of State issued a certificate reserving the corporate name, "Men's Clinics of America, Inc."⁵⁴ On August 19, 1996, Strauss incorporated an entity called "Richard H. Strauss M.D., Inc," which was later dissolved on August 27, 1998.

The Investigative Team received firsthand accounts of abuse that occurred at Strauss' private clinic in Columbus, described in Section V.G, together with a summary of our investigative efforts and findings related to the Columbus clinic.

Searches of nationwide databases and court records for Franklin County did not reveal any civil or criminal litigation naming "Men's Clinics of America" as a party.

(b) "Men's Medical Clinic of America, Inc." in Los Angeles

While still employed at OSU, Strauss began taking steps to relocate to California and open another private men's clinic there. Specifically, in June 1997, Strauss obtained "Name

⁵³ State Med. Bd. of Ohio, Application for Endorsement of a Medical License: Richard Harry Strauss (May 23, 1978) [CTRL00003477].

⁵⁴ State of Ohio, Sec'y of State, Name Reservation Certificate No. NR609912 (Apr. 2, 1996) [RHS_000094-97].

Reservation Certificates” from the California Secretary of State reserving two names, the “Men’s Clinics of America” and “Sexually Transmitted Disease - Men’s Clinics.”⁵⁵

On February 3, 1998, Strauss filed Articles of Incorporation for “Men’s Medical Clinic of America, Inc.” with the California Secretary of State. The entity address listed for Strauss’ California clinic was: 11669 Santa Monica Blvd, Suite 104, Los Angeles, CA 90025. After less than one year of incorporation, on December 30, 1998, Strauss filed a Certificate of Dissolution, certifying that the corporation was dissolved.

According to Strauss’ obituary from 2005, he had been volunteering at a medical clinic near Hermosa Beach that treated an underserved population.⁵⁶ We do not know the name of that clinic, or whether he volunteered or worked at other medical clinics in California following the closure of the “Men’s Medical Clinic of America” in December 1998.

Because the scope of the Independent Investigation did not extend to the time period following Strauss’ retirement from OSU on March 1, 1998, we did not undertake additional investigative efforts concerning Strauss’ professional (or volunteer) activities in California. That said, we were not contacted by anyone alleging that they were sexually abused by Strauss in California, although we are aware that the broad national media coverage of the Independent Investigation included reports in major newspapers in California, including the *Los Angeles Times*.

Lastly, searches of nationwide databases and court records for Los Angeles County, California, did not reveal any civil or criminal litigation naming “Men’s Medical Clinic of America, Inc.” or “Sexually Transmitted Disease – Men’s Clinics of America” as a party.

(iii) Medical Examiner’s Report

The Investigative Team obtained a copy of the Los Angeles County Medical Examiner’s report issued after Strauss’ death.⁵⁷ The report indicated that his date of death was August 19, 2005, with “suicide” listed as the cause of death.⁵⁸ The Department of Coroner Investigator’s narrative stated that a note signed and dated by Strauss on August 17, 2005, was found on the

⁵⁵ State of Cal., Sec’y of State, Name Reservation Certificate No. R0461071 (June 16, 1997) [RHS_000052]; State of Cal., Sec’y of State, Name Reservation Certificate No. R0461072 (June 16, 1997) [RHS_000053].

⁵⁶ Dr. Richard Harry Strauss, FIND A GRAVE, <https://www.findagrave.com/memorial/191128640/richard-harry-schiff> (last visited May 14, 2019).

⁵⁷ See Cty. of L.A., Dep’t of Coroner, Examination Protocol: Richard H. Strauss (Aug. 21, 2005) [CTRL00002164]; Cty. of L.A., Dep’t of Coroner, Medical Report: Richard H. Strauss (Aug. 21, 2005) [CTRL00002164]; Cty. of L.A., Dep’t of Coroner, Preliminary Examination Report: Richard H. Strauss (Aug. 20, 2005) [CTRL00002164]; Cty. of L.A., Dep’t of Coroner, Medical Evidence: Richard H. Strauss (Aug. 20, 2005) [CTRL00002164]; Cty. of L.A., Dep’t of Coroner, Case Report: Richard H. Strauss (Aug. 20, 2005) [CTRL00002164]; Cty. of L.A., Dep’t of Coroner, Investigator’s Narrative: Richard H. Strauss (Aug. 20, 2005) [CTRL00002164].

⁵⁸ Cty. of L.A., Dep’t of Coroner, Investigator’s Narrative: Richard H. Strauss (Aug. 20, 2005) [CTRL00002164].

scene, attributing Strauss' suicide to "significant escalating medical and pain problems since January 2002, which were not consistent with [Strauss'] preferred lifestyle."⁵⁹

Representatives from Strauss' family informed the Investigative Team that Strauss was struggling with depression and chronic abdominal pain at the time of his death. We were also told that, at the time of Strauss' death, the family did not recover any personal papers or other documentation potentially relevant to the Independent Investigation, as Strauss reportedly took steps to eliminate most of his personal possessions prior to his suicide.

c. Strauss' Publications (Articles, Papers, Books)

Strauss published numerous academic articles related to sports medicine, as reflected in the list of publications in his curriculum vitae.⁶⁰ Additionally, from 1986 to 1998, he was the Editor-in-Chief of *The Physician and Sportsmedicine*, a journal published by McGraw Hill.⁶¹

The investigative efforts we undertook to identify Strauss' medical publications with potential relevance to the Independent Investigation is provided in Sections V.E and F.

d. Media Coverage (Historical, Current)

The Investigative Team ran comprehensive searches for media coverage of Strauss that pre-dated this Investigation and did not identify any negative reports pertaining to Strauss or allegations of misconduct.

Strauss appeared in a number of news articles during his tenure at OSU, although those articles contained nothing of particular significance to the Independent Investigation. In the 1980s and early 1990s, Strauss was frequently quoted in local and national news articles as an authority on sports medicine, and particularly as an expert on steroid use by athletes.⁶² For

⁵⁹ *Id.*

⁶⁰ Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000815–21].

⁶¹ See Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000812, RHS_000821]; Richard H. Strauss, *My Final Editor's Notes*, 26 PHYSICIAN & SPORTSMEDICINE 5 (1998) [CTRL00000259] (indicating that the September 1998 issue would be Strauss' last issue as editor-in-chief).

⁶² See, e.g., Steve Berkowitz, *High School Students Form Growing Marketplace for Drugs*, WASH. POST, Jan. 15, 1989, 1989 WLNR 3535204; Angie Cannon & Gary Ferman, *The Bulky Boom: Despite Dangers, Steroid Use Growing*, MIAMI HERALD, May 17, 1987, at 1A, 1987 WLNR 661209; Angie Cannon & Gary Ferman, *Muscles to Die for: Steroid Users Risk Their Lives*, LEXINGTON HERALD-LEADER, May 24, 1987, at A1, 1987 WLNR 1833550; Don Edwards, *Olympians Can Rest Easy Eating Lamb Fries*, LEXINGTON HERALD-LEADER, Sept. 30, 1988, at C1, 1988 WLNR 2141385; W. Gifford-Jones, *The Doctor Game: Athletes Pay Dearly for Using Steroids*, GLOBE & MAIL, Mar. 1, 1984, 1984 WLNR 809032; Bob Gillespie & Dave Moniz, *Steroids: A Generation at Risk*, COLUM. ST., Aug. 18, 1991, at 1C, 1991 WLNR 1052496; Editorial, *In-Depth Steroid Abuse Study Long Overdue*, COLUM. ST., Aug. 19, 1991, at 8A, 1991 WLNR 1055917; Kelly P. Kissel, *Contraceptive Steroid*, ASSOCIATED PRESS, Dec. 31, 1990; *New Contraceptive Could Bring Abuse*, VANCOUVER SUN, Dec. 31, 1990, at C4, 1990 WLNR 2649613; Mary J. Pitzer, *Healthy Profits: Sports Medicine Has Become a High-tech Growth Industry Serving Amateurs As Well As Professional Athletes*, DAILY NEWS, June 10, 1990, at B1, 1990 WLNR 1019751; Fern Schumer-Chapman, *Steroid Edge Real or Illusion?; Experts Doubt the Effects Reported on Athletes' Muscles*, WASH. POST, Oct. 18,

example, Strauss was quoted in a 1984 article (and in many articles that followed) about the rise in the use of anabolic steroids among athletes and the physical and emotional consequences that followed.⁶³ In 1990, Strauss was quoted in an article about the growth of the sports medicine industry, noting that sports medicine is not as “lucrative” as some medical practitioners might believe.⁶⁴ And, in a 1996 article about seeking second opinions, Strauss cautioned that getting a second opinion does not “endear” patients to their doctors.⁶⁵

The Investigative Team also found occasional reporting relating to Strauss’ research, including a study he performed regarding injuries among wrestlers aged nine to 20,⁶⁶ and a steroid study he conducted with colleagues at OSU that was picked up by the Associated Press and printed in several regional and national publications.⁶⁷ These articles referred to Strauss as a professor of preventive and internal medicine, a team physician at OSU, the editor of *The Physician and Sportsmedicine*, a team physician for USA Wrestling, a member of the drug-screening team at the Los Angeles Olympics, and/or a leader of the American College of Sports Medicine.⁶⁸

With respect to recent coverage of Strauss, since being retained to conduct the Independent Investigation, we monitored and incorporated factual reports or allegations concerning Strauss into our workplan, as appropriate.

1988, 1988 WLNR 2507091; Gordon Slovut, *Serious Side Effects Make Use of Steroids a Hairy Proposition*, STAR TRIB., Jan. 18, 1987, at 14C, 1987 WLNR 1373898; Bill Utterback, *Muscle Mania Stirs Steroids Epidemic*, HOUS. CHRON., Sept. 27, 1987, at 6, 1987 WLNR 1905556; David Zinman, *Medicine Steroids and Sports: A Growing Problem*, NEWSDAY, Jan. 6, 1987, at 3, 1987 WLNR 182625.

⁶³ W. Gifford-Jones, *The Doctor Game: Athletes Pay Dearly for Using Steroids*, GLOBE & MAIL, Mar. 1, 1984, 1984 WLNR 809032.

⁶⁴ Mary J. Pitzer, *Healthy Profits: Sports Medicine Has Become a High-tech Growth Industry Serving Amateurs As Well As Professional Athletes*, DAILY NEWS, June 10, 1990, at B1, 1990 WLNR 1019751.

⁶⁵ Gordon Slovut, *Getting Another Doctor’s Point of View Might Be Good Advice, But It’s Also Important to Know When to Do That and How. When Two Opinions Are Better Than One*, STAR TRIB., Feb. 1, 1996, at 3E, 1996 WLNR 5044186.

⁶⁶ See Sharon Rutenberg, *Young Wrestlers Least Injured*, UNITED PRESS INT’L, Oct. 21, 1982.

⁶⁷ See, e.g., Paul Berg, *Female Athletes Report Changes to Body from Steroid Use*, WASH. POST, May 29, 1985, 1985 WLNR 1468321; *Steroid Warning to Women / Study Suggests Drug’s Unwanted Side Effects Can Be Permanent*, HOUS. CHRON., May 17, 1985, at 16, 1985 WLNR 1290824; *Study Links Steroids to More Facial Hair on Women*, WICHITA EAGLE, May 17, 1985, at 1B, 1985 WLNR 1181517; Lindsey Tanner, *Side-effects of Steroids Found*, PHILA. INQUIRER, May 19, 1985, at 17, 1985 WLNR 224596; Lindsey Tanner, *Study Confirms Steroids Produce Masculine Side Effects in Women*, ASSOCIATED PRESS, May 17, 1985.

⁶⁸ See, e.g., Collins Conner, *Athletes’ Weight Loss Might Damage Health*, ST. PETERSBURG TIMES, Jan. 10, 1988, at 24 (identifying Strauss as a “team physician for the university and for USA Wrestling”); Thomas Ferraro, *Sports Medicine: Big Business*, UNITED PRESS INT’L, June 9, 1986 (referring to Strauss as the editor in chief of *The Physician and Sportsmedicine*); *More Sports Drug Woes Ahead? New Male Contraceptive Could Open Door for Steroid Abuse*, FRESNO BEE, Jan. 16, 1991, at C5, 1991 WLNR 1290065 (referring to Strauss as editor of *The Physician and Sportsmedicine*); Lew Scarr, *Steroids’ Benefits, Risks Debated; Experts at Sports Medicine Session Differ on Their Effects*, SAN DIEGO UNION-TRIB., May 25, 1984, at B1 (identifying Strauss as a “team physician at Ohio State University and a member of the drug testing team at the Los Angeles Olympics”); Gordon Slovut, *Serious Side Effects Make Use of Steroids a Hairy Proposition*, STAR TRIB., Jan. 18, 1987, at 14C, 1987 WLNR 1373898 (referring to Strauss as a “leader[] of the American College of Sports Medicine”).

IV. STRAUSS' ROLES AT THE OHIO STATE UNIVERSITY

In September 1978, when Strauss began his employment at OSU, the University's Sports Medicine program was nascent. At that time, the provision of medical care for University athletes primarily took place in Athletics facility training rooms and the Sports Medicine Clinic overseen by Student Health Services.⁶⁹ In the early 1980s, a number of organizational changes were made, including the establishment of a Sports Medicine Division in the College of Medicine that was intended to oversee medical care for student-athletes, the education of health science students in Sports Medicine, and the development of research opportunities in the field of Sports Medicine.⁷⁰ An effort was also made at that time to ensure that patient care for student-athletes would primarily be provided at OSU Hospitals, should hospitalization be necessary.⁷¹

In the early 1980s, student-athletes at OSU received medical services under the direction of the Head Team Physician/Director of Sports Medicine (Dr. Bob Murphy).⁷² The Head Team Physician was assisted by four staff physicians from the Student Health Center and four consulting physicians.⁷³ Approximately 10 senior medical students rotated into sports coverage each year as part of their medical school training.⁷⁴ Student-athletes received medical services from the Sports Medicine Clinic (which operated 9–11 am, Monday–Friday) at the Student Health Center. In addition to the physicians, the Sports Medicine Clinic was also staffed by two head athletic trainers.⁷⁵ Aside from the medical services provided to student-athletes at the Sports Medicine Clinic, team physicians and medical students were assigned to specific training rooms in the practice facilities utilized by the teams, and medical personnel were also available for home games (away-game coverage was far more limited).⁷⁶

By the early 1990s, most health care for student-athletes was provided in athletic facility training rooms that were staffed by athletic trainers and team physicians, and each training room was supposed to have an area designated as a physician's office.⁷⁷ Student-athletes could also be treated at the new OSU Sports Medicine Center that was located on Kenny Road, at certain physicians' offices, at Student Health (assuming the student-athlete had student health insurance), or at OSU Hospitals (admissions, outpatient testing, and surgery).⁷⁸

⁶⁹ Letter from H. Spencer Turner to William R. Nester (July 21, 1980) [CTRL_HC_00000596]; Letter from Robert J. Murphy to William R. Nester (Sept. 3, 1980) [CTRL_HC_00000606].

⁷⁰ Letter from Henry G. Cramblett to W. Ann Reynolds (Aug. 14, 1980) [CTRL_HC_00000604].

⁷¹ *Id.*; Letter from Robert N. Clark to Henry G. Cramblett (Jan. 15, 1981) [CTRL_HC_00000609].

⁷² Letter from Kenneth A. Mines to Edward H. Jennings (Dec. 7, 1983) [CTRL_HC_00000002] (enclosing the U.S. Dep't of Education's Statement of Findings).

⁷³ *Id.*

⁷⁴ *Id.*

⁷⁵ *Id.*

⁷⁶ *Id.*

⁷⁷ Ohio State Univ., OSU Medical Program [CTRL_HC_00042550].

⁷⁸ *Id.*

As explained below, because the various entities involved in the Sports Medicine program worked in tandem and often with informal delineation, it is not always clear from a recordkeeping perspective where Strauss' role in one entity ended and another began.⁷⁹ However, it is clear that Strauss had concurrent responsibilities within each of the following departments throughout most of his nearly two decades at the University.

A. College of Medicine/School of Public Health

Strauss' employment at OSU began in September 1978 with his faculty appointment in the College of Medicine as an Assistant Professor of Medicine in the Pulmonary Disease Division of the Department of Medicine.⁸⁰ Strauss was recruited to the University by the Associate Dean of the College of Medicine (Dr. Manuel Tzagournis) at the urging of the Director of the Division of Pulmonary Diseases (Dr. Michael E. Whitcomb), who championed Strauss during the hiring process as one of the "finest young pulmonary physiologists in the country" due to his experience in the area of diving physiology of the lung.⁸¹ Still, it was noted at the time of Strauss' hiring that he had a relative lack of experience in teaching and clinical practice.⁸²

1. Changes in Faculty Appointment

In October 1980, the Chair of the Department of Preventive Medicine (Martin D. Keller) recommended that Strauss be appointed to serve as Associate Director of Sports Medicine in the Department of Preventive Medicine (which housed the Division of Sports Medicine).⁸³ Because Strauss' primary faculty appointment remained with the Pulmonary Disease Division in the Department of Medicine, he held a joint appointment with no salary in the Department of Preventive Medicine.⁸⁴ However, effective January 1, 1982, Strauss' appointment was

⁷⁹ See, e.g., Letter from David E. Henderson to Edward H. Jennings (Sept. 30, 1982) [CTRL_HC_00126527] (enclosing document providing: "Athletic Medicine is provided in large measure by professional personnel working primarily within the Athletic Department, and using on-site facilities. The activities are wide-spread and draw upon resources made available by the Athletic Department, University Health Service, and arrangement existing with the University Hospitals.").

⁸⁰ Letter from Michael E. Whitcomb to Patricia Heck (Apr. 3, 1979) [CTRL00000265]; Ohio State Univ. Hosps., Application for Appointment to the Medical Staff: Richard H. Strauss (June 14, 1978) [CTRL00000265].

⁸¹ See Letter from Michael E. Whitcomb to Patricia Heck (Apr. 3, 1979) [CTRL00000265]; Letter from Michael E. Whitcomb to Manuel Tzagournis (Aug. 15, 1978) [CTRL00000265]; Letter from Michael E. Whitcomb to Richard Strauss (Apr. 21, 1978) [CTRL00000265].

⁸² Letter from Michael E. Whitcomb to Manuel Tzagournis (Aug. 15, 1978) [CTRL00000265].

⁸³ Letter from Martin D. Keller to Manuel Tzagournis (Oct. 16, 1980) [CTRL00000265].

⁸⁴ Letter from Martin D. Keller to Michael Whitcomb (Oct. 9, 1981) [CTRL00000265] (indicating Strauss was appointed as Associate Director of Sports Medicine); Letter from Martin D. Keller to Manuel Tzagournis (Oct. 16, 1980) [CTRL00000265] (requesting Strauss' appointment as Associate Director of Sports Medicine in the Department of Preventive Medicine and noting that Strauss had been approved for appointment as Assistant Professor in Preventive Medicine without salary); see also Letter from David G. Cornwell to Dorothy Jackson (Jan. 25, 1982) [CTRL00000265]; Letter from Michael E. Whitcomb to Calvin M. Kunin (Dec. 7, 1981) [CTRL00000265]; cf. Letter from R.R. Lanese to M.D. Keller (Oct. 15, 1980) [CTRL00000265] (R.R. Lanese, Chairman of the Promotion and Tenure Committee, to M.D. Keller recommending, at Keller's request, that Strauss be appointed to the Department of Preventive Medicine).

transferred such that his primary affiliation was with the Department of Preventive Medicine and his no-salary joint appointment was in the Department of Medicine.⁸⁵

Strauss was promoted from Assistant Professor to a tenured Associate Professor in July 1983.⁸⁶ In July 1992, Strauss was promoted from Associate Professor to Professor.⁸⁷ In 1995, the Department of Preventive Medicine was moved from the College of Medicine to the School of Public Health; consistent with this transition, Strauss' faculty appointment at the College of Medicine became a faculty appointment at the School of Public Health.⁸⁸

As discussed in Section VI.C., upon Strauss' retirement from the University in 1998, the Appointment, Promotion, and Tenure Advisory Committee recommended Strauss to the Board of Trustees for an emeritus appointment in the School of Public Health.⁸⁹ The Board of Trustees approved Strauss' appointment as Faculty Emeritus in March 1998, apparently without the approval of Dr. Bernadine Healy, the Dean of the College of Medicine and Public Health.⁹⁰

2. Teaching Duties

Strauss performed various teaching duties at the College of Medicine/School of Public Health during his career at OSU.⁹¹ By virtue of his role as Associate Director of Sports Medicine, Strauss helped the Director of Sports Medicine establish academic guidelines for the medical students doing an elective sports medicine rotation. Strauss also served as a preceptor

⁸⁵ Letter from Michael E. Whitcomb to Calvin M. Kunin (Dec. 7, 1981) [CTRL00000265]; Letter from David G. Cornwell to Dorothy Jackson (Jan. 25, 1982) [CTRL00000265]; Letter from Martin D. Keller to Michael Whitcomb (June 1, 1983) [CTRL00000265] (Change of Appointment Memorandum from M. Keller to Whitcomb).

⁸⁶ See Letter from Martin D. Keller to Michael Whitcomb (Oct. 9, 1981) [CTRL00000265]; Ohio State Univ., Recommendation for Promotion: Richard H. Strauss (Nov. 12, 1991) [CTRL00000265]; Letter from Edward H. Jennings to Richard Strauss (Aug. 4, 1983) [CTRL00000265]; Letter from Manuel Tzagournis to Richard Strauss (July 15, 1983) [CTRL00000265].

⁸⁷ Letter from Manuel Tzagournis to Frederick E. Hutchinson (Jan. 15, 1992) [CTRL00000265]; Letter from Steven G. Gabbe to David G. Cornwell (Jan. 6, 1992) [CTRL00000265]; Letter from Randall E. Harris to Manuel Tzagournis (Nov. 14, 1991) [CTRL00000265]; Letter from Manuel Tzagournis to Richard H. Strauss (June 8, 1992) [CTRL00000265]; Memorandum from Ronald L. St. Pierre to Randall Harris (Mar. 27, 1992) [CTRL00000265]; Letter from Manuel Tzagournis to Richard Strauss (Feb. 25, 1992) [CTRL00000265].

⁸⁸ Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265].

⁸⁹ Memorandum from Ronald L. St. Pierre to Nancy Rudd (Jan. 22, 1998) [CTRL00000265].

⁹⁰ Ohio State Univ., Bd. of Trs., Meeting Minutes (Mar. 6, 1998) [CTRL00002311] (approving Professor Emeritus title on March 6, 1998, to be effective on March 1, 1998).

⁹¹ From 1985 to 1988 and for several semesters between 1990 and 1991, Strauss taught medical students at OSU in a one- to two-month sports medicine elective. See, e.g., Richard H. Strauss, Log of Continuing Medical Education (1990–1991) [CTRL00000140]; Richard H. Strauss, Log of Continuing Medical Education (1988) [CTRL00000140]; Richard H. Strauss, Log of Continuing Medical Education (1987) [CTRL00000140]; Memorandum from Bill Myles to Paul Krebs (Aug. 9, 1985) [CTRL_HC_00013042] (enclosure listing Strauss as a preceptor for a number of medical students in 1985 and 1986).

(instructor) and provided an academic evaluation of each student's performance at the end of their rotation.⁹²

The Sports Medicine Division worked closely with the Athletics Department and Student Health to provide sports medicine training for medical students. Consequently, Strauss' teaching roles in the Sports Medicine Division overlapped with his roles in the Sports Medicine Clinic and as a Team Physician. For example, students electing to participate in a sports medicine rotation were required to assist with medical coverage at the Sports Medicine Clinic in Student Health, at team practices, and at home games; to give an oral presentation at a Preventive Medicine seminar and complete a research paper; and to attend a monthly evening class.⁹³ Strauss' teaching efforts primarily involved medical students, residents, and fellows from both Family Medicine and Emergency Medicine (Emergency Medicine was a division in Preventive Medicine until July 1990).⁹⁴ In addition to teaching fourth-year medical students in a sports medicine elective, Strauss also served as the director of a Behavioral Sciences module for first- and second-year medical students.⁹⁵

We did not identify any allegations or documentation during our investigation evidencing any student complaints about Strauss as it related to his teaching duties.

B. University Athletics Department

Within months of starting his employment at the College of Medicine, Strauss began serving as a team physician to OSU student-athletes on an informal, volunteer basis.⁹⁶ By October 1980, Strauss was appointed Associate Director of Sports Medicine in the Department of Preventive Medicine (unpaid), at which point he was spending approximately 20% of his time practicing clinical sports medicine with OSU varsity athletes at the Sports Medicine Clinic in Student Health, and worked daily in the late afternoon at the Larkins Hall training room.⁹⁷ In August 1981, the Head Team Physician (Dr. Bob Murphy) requested that the Athletics Director (Hugh Hindman) formally appoint Strauss as a team physician (no salary), noting that Strauss' duties were to include attendance at the Sports Medicine Clinic at Student Health twice a week

⁹² Letter from Doris I. Charles to David E. Henderson (Oct. 14, 1982) [CTRL_HC_00000616]; Memorandum from Bill Myles to Paul Krebs (Aug. 9, 1985) [CTRL_HC_00013042] (enclosure listing Strauss as a preceptor for a number of medical students in 1985 and 1986).

⁹³ Letter from Doris I. Charles to David E. Henderson (Oct. 14, 1982) [CTRL_HC_00000616] (describing Sports Medicine Program).

⁹⁴ Letter from Randall E. Harris to Manuel Tzagournis (Nov. 14, 1991) [CTRL00000265].

⁹⁵ Letter from Steven G. Gabbe to David G. Cornwell (Jan. 6, 1992) [CTRL00000265].

⁹⁶ See Memorandum from Manuel Tzagournis to Edward H. Jennings & Myles Brand (Dec. 8, 1987) [CTRL_HC_00027627] (indicating in enclosed curriculum vitae that Strauss became a team physician in 1978); see also Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 19, 1996) [RHS_000545-49] (Strauss letter dated April 1996 references 17 years of service as team physician).

⁹⁷ Memorandum from Richard H. Strauss to Martin Keller [CTRL00000265].

and coverage in the Larkins training rooms.⁹⁸ In July 1982, the Athletics Department began funding a portion of Strauss' College of Medicine salary (ranging from 5–10% over the years).⁹⁹

For approximately 17 years, Strauss worked as a team physician for the athletes based in Larkins Hall, including the men's swimming/diving, wrestling, gymnastics, fencing, and lacrosse teams. Over the years, Strauss expanded his reach to work with teams based in other facilities as well, and—while not always as a dedicated team physician—Strauss treated students who participated in a range of sports including hockey, cheerleading, volleyball, soccer, track, golf, baseball, tennis, water polo, and football.

In July 1996, the Head Team Physician/Medical Director of the OSU Sports Medicine and Family Health Center, Dr. John Lombardo, notified Strauss that his agreement with the Athletics Department was being terminated.¹⁰⁰ The termination followed a series of complaints raised by male student-athletes and non-student-athlete male patients in the Student Health Center. Those complaints are discussed in Sections V and VI.

C. Student Health Services

Due to the informal and unpaid nature of Strauss' initial work as a team physician in 1979, there is sparse official documentation as to the precise start date of Strauss' activities in the Sports Medicine Clinic at Student Health. The University records we located in our searches of the OSU Archives yielded incomplete and, at times, inconsistent information concerning Strauss' activities at Student Health. For example, Strauss was listed as a physician in Student Health's personnel roster for 1981–1982, but we could not locate similar rosters for other relevant years, and Strauss was not listed as a physician in Student Health in OSU's 1981/1982 Faculty/Staff Directory.¹⁰¹ Strauss only appeared in the Faculty/Staff Directories as a "Visiting Physician" for

⁹⁸ Letter from Robert J. Murphy to Hugh Hindman (Aug. 18, 1981) [RHS_000644].

⁹⁹ See Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; Ohio State Univ., Personnel Action Request: Richard H. Strauss (June 25, 1982) [CTRL00000265]; *see also* Letter from Robert J. Murphy to Edward Jennings (Oct. 25, 1982) [CTRL_HC_00126527] (referencing that Strauss had no "formal agreement" with the Athletics Department from 1980–1982 but noting that, starting in 1982, Strauss had a "formal agreement" with Athletics in which Athletics paid a portion of his salary); Letter from Linda W. Daniel to All Visiting Teams (Sept. 1, 1983) [CTRL_HC_00015622] (listing Strauss as team physician in September 1983); Memorandum from Manuel Tzagournis to Edward H. Jennings & Myles Brand (Dec. 8, 1987) [CTRL_HC_00027627] (indicating in enclosed curriculum vitae that Strauss became a team physician in 1978); Letter from Robert J. Murphy to Hugh Hindman (Aug. 18, 1981) [RHS_000644] (noting that because Strauss was "under full contract with the University, there will be no salary commitments from the Athletic Department but the title would be very helpful"); Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265] (indicating Strauss did not receive a salary for athletics until July 1982); Letter from Martin D. Keller to Manuel Tzagournis (Oct. 16, 1980) [CTRL00000265] (noting that Strauss had been approved for appointment as Assistant Professor in Preventive Medicine).

¹⁰⁰ See Fax from Helen M. Ninos to John Lombardo (July 31, 1996) (sending proposed edits to Lombardo's written letters regarding Strauss' termination) [CTRL_HC_00007555].

¹⁰¹ Ohio State Univ., Univ. Health Serv., Personnel Roster [CTRL_HC_00001110].

the years 1987/1988, 1988/1989, 1989/1990, and 1990/1991.¹⁰² Although he began his 20% appointment in Student Health in 1994, he was not listed as a physician with Student Health in the 1994/1995 Faculty/Staff Directory. Strauss was listed as a Men's Clinic physician in the 1995/1996 Faculty/Staff Directory.¹⁰³

However, various contemporaneous records—including several versions of Strauss' curriculum vitae—indicated that he served as a physician in the Sports Medicine Clinic at Student Health Services (then called “University Health Services”) beginning in or around 1980, and possibly as early as 1978.¹⁰⁴ As a technical matter, Strauss' only “formal” appointment in Student Health began in July 1994 with his 20% appointment as a Student Health staff physician in the then-newly formed Men's Clinic.¹⁰⁵ Nevertheless, as a factual matter, Strauss provided medical treatment to students in the Student Health Center from roughly 1980 through early 1996, primarily in conjunction with the Sports Medicine Clinic and his role as a team physician. Although it is unclear precisely when he was tapped for the role, he also served as chief physician of the Sports Medicine Clinic.¹⁰⁶

Strauss began working on a volunteer basis to develop a specialty Men's Clinic in Student Health during the 1993/1994 school year before receiving a formal 20% appointment in July 1994.¹⁰⁷ As part of his appointment, Strauss saw Men's Clinic patients approximately two hours per day through the regular quarters.¹⁰⁸

¹⁰² Ohio State Univ., Faculty/Staff Directory (1987–1988) [CTRL_HC_00002423]; Ohio State Univ., Faculty/Staff Directory (1988–1989) [CTRL_HC_00002429]; Ohio State Univ., Faculty/Staff Directory (1989–1990) [CTRL_HC_00002438-39]; Ohio State Univ., Faculty/Staff Directory (1990–1991) [CTRL_HC_00002448].

¹⁰³ Ohio State Univ., Faculty/Staff Directory (1995–1996) [CTRL_HC_00002483].

¹⁰⁴ See, e.g., Curriculum Vitae of Richard H. Strauss (1980) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Mar. 1981) [CTRL00000265]; Curriculum Vitae of Richard H. Strauss (Aug. 1985) [CTRL_HC_00027627]; Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000811–21]; Letter from Richard H. Strauss to Martin Keller (Oct. 13, 1980) [CTRL00000265] (“I spend about 20% of my time in clinical sports medicine with OSU varsity athletes, at the Sports Medicine Clinic of the Student Health Service and at the Larkins Hall training room daily in the late afternoon.”); Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 19, 1996) [RHS_000546] (“I have worked part-time at the Student Health Services for sixteen years, much of that time as Director of the Sports Medicine Clinic. . . . During the past three years, I have been the Director of the Student Health Service's Men's Clinic, which I founded.”). Notably, however, there are some dates in Strauss' curriculum vitae that do not precisely align with the official appointment records, so the precision of the dates is questionable.

¹⁰⁵ Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; see also Ohio State Univ., Faculty/Staff Directory (1995–1996) [CTRL_HC_00002483] (staff directory for 1995–1996 listing Strauss as a physician in the Men's Clinic).

¹⁰⁶ Letter from Steven G. Gabbe to David G. Cornwell (Jan. 6, 1992) [CTRL00000265].

¹⁰⁷ Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645] (noting that Strauss began volunteering at the Student Health Center and/or Men's Clinic “a couple of quarters before, but was not officially appointed until July 1, 1994 to work [in the Student Health Center] four hours per week”).

¹⁰⁸ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

On August 5, 1996, following an investigation and personnel action arising from student complaints about Strauss' conduct, the Office of the Vice President for Student Affairs, which oversaw Student Health Services, formally declined to renew Strauss' 20% appointment with Student Health.¹⁰⁹ Strauss' appointment as a physician with Student Health was not a clinical appointment associated with his tenured faculty position in the School of Public Health; accordingly, the nonrenewal of Strauss' appointment with Student Health had no effect on his faculty appointment in the School of Public Health.¹¹⁰

D. OSU Medical Center/University Hospitals

Strauss held attending staff privileges at OSU Hospitals from September 6, 1978, to December 31, 1994—the vast majority of his time at OSU—although evidence suggests Strauss rarely exercised his hospital privileges.¹¹¹ Strauss' medical staff appointment was initially through the Department of Medicine's Pulmonary Disease and General Medicine Divisions but

¹⁰⁹ Letter from David Williams, II, to Richard H. Strauss (Aug. 5, 1996) [CTRL_HC_00007547]; *cf.* Letter from Timothy P. Nagy to Helen M. Ninos (June 26, 1996) [CTRL_HC_00007526] (noting that for the 1996–1997 school year, Strauss received only 80% of his compensation package, as the remaining 20% was funded by Student Health Services); Letter from Helen M. Ninos to Timothy P. Nagy (June 3, 1996) [CTRL_HC_00007532]; Letter from Helen M. Ninos to Richard Strauss (Mar. 13, 1996) [CTRL_HC_00007549] (providing notice in March 1996 that Office of Student Affairs was considering non-renewal of appointment due to three student complaints within a period of 13 months).

¹¹⁰ Letter from David Williams, II, to Richard H. Strauss (Aug. 5, 1996) [CTRL_HC_00007547]; Letter from Helen M. Ninos to Timothy P. Nagy (Mar. 13, 1996) [CTRL_HC_00007549].

¹¹¹ See Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (Apr. 12, 1984) [CTRL00000265]; Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (June 2, 1983) [CTRL00000265]; Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (Apr. 6, 1982) [CTRL00000265]; Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (Apr. 10, 1981) [CTRL00000265]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (Aug. 27, 1981) [CTRL00000265]; Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (Apr. 24, 1980) [CTRL00000265]; Ohio State Univ. Hosps., Application for Appointment to the Medical Staff: Richard H. Strauss (June 14, 1978) [CTRL00000265]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (Mar. 10, 1992) [CTRL00000140]; Ohio State Univ. Hosps., Reappointment of Richard H. Strauss (July 1, 1992) [CTRL00000140]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (Apr. 13, 1990) [CTRL00000140]; Ohio State Univ. Hosps., Reappointment of Richard H. Strauss (Aug. 8, 1990) [CTRL00000140]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (Apr. 7, 1989) [CTRL00000140]; Ohio State Univ. Hosps., Reappointment of Richard Strauss (June 14, 1989) [CTRL00000140]; Ohio State Univ. Hosps., Application for Renewal of Appointment to the Medical Staff: Richard H. Strauss (Mar. 22, 1988) [CTRL00000140]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (Mar. 22, 1988) [CTRL00000140]; Ohio State Univ. Hosps., Reappointment of Richard H. Strauss (June 8, 1988) [CTRL00000140]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (Apr. 3, 1987) [CTRL00000140]; Ohio State Univ. Hosps., Reappointment of Richard H. Strauss (Oct. 14, 1987) [CTRL00000140]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (Apr. 17, 1986) [CTRL00000140]; Ohio State Univ. Hosps., Reappointment of Richard H. Strauss (June 11, 1986) [CTRL00000140]; Ohio State Univ. Hosps., Application for Appointment to the Medical Staff: Richard H. Strauss (May 17, 1985) [CTRL00000140]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (May 30, 1985) [CTRL00000140]; Ohio State Univ., Med. Center, Application for Reappointment: Richard H. Strauss (Apr. 28, 1994) [CTRL00000140]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (May 2, 1994) [CTRL00000140].

was transferred to the Department of Preventive Medicine's Preventive Medicine and Sports Medicine Divisions in 1983.¹¹²

In September 1994, the Office of the Medical Director of the University Hospitals notified Strauss that his lack of board certification was flagged in its audit of medical staff credentialing files; board certification was mandatory under the Bylaws and Rules and Regulations of the Medical Staff.¹¹³ On December 23, 1994 (effective December 31, 1994), Strauss voluntarily resigned his attending staff privileges at the OSU Hospitals.¹¹⁴

We did not identify any allegations or documentation during our investigation indicating that Strauss' resignation from his medical staff appointment at the University Hospitals was due to any complaints or disciplinary actions concerning misconduct.

V. SUMMARY OF FINDINGS REGARDING STRAUSS' SEXUAL ABUSE OF UNIVERSITY STUDENTS

Throughout this Report, all references to "students" denotes individuals who were students at OSU during the relevant time frame (September 1978–March 1998). We are omitting "former" for ease of reference. We are also omitting "former" in our discussion of University employees and staff from the relevant time period.

A. Investigative Team's Objective Analytical Framework

The Investigative Team conducted interviews with 177 students who provided firsthand accounts of experiences with Strauss that we found to meet objective standards of sexual abuse. Our analysis was informed by consultations with the two independent External Physicians identified in Section II.B., both of whom have extensive experience serving as team physicians for intercollegiate men's athletics, and each of whom took into consideration the prevailing medical practices applicable to the relevant time period.

Given that we employed objective criteria to our analysis of Strauss' conduct, we note that 22 of the 177 students we interviewed did *not* affirmatively state that they felt Strauss' conduct constituted "abuse"; in some cases, the students affirmatively stated that they did not

¹¹² Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (June 13, 1984) [CTRL00000265]; Memorandum from Martin D. Keller to Michael Whitcomb (June 1, 1983) [CTRL00000265]; Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (June 2, 1983) [CTRL00000265]; Ohio State Univ. Hosps., Application for Privileges: Richard H. Strauss (June 2, 1983) [CTRL00000265]; Ohio State Univ. Hosps., Medical Staff Reappointment/Reappraisal Form: Richard H. Strauss (Oct. 27, 1981) [CTRL00000265]; Memorandum from Manuel Tzagournis to Calvin Kunin (Nov. 5, 1979) [CTRL00000265].

¹¹³ Letter from Maurea L. Al-Khoury to Richard H. Strauss (Sept. 20, 1994) [CTRL00000140] (letter and enclosures).

¹¹⁴ Letter from Richard H. Strauss to Hagop Mekhjian (Dec. 23, 1994) [CTRL00000140]; Letter from Maurea L. Al-Khoury to Richard H. Strauss (Sept. 20, 1994) [CTRL00000140] (letter and enclosures).

feel that they were abused. However, these students described examination techniques or other conduct by Strauss that fell outside objective boundaries of acceptable doctor-patient interactions, as informed by our consultations with the two External Physicians. For example, a number of these students explained that Strauss would routinely touch their genitals at every visit, regardless of the medical ailment presented, including for a sore throat. We categorized this practice as sexually abusive, as there appeared to be no medical basis for Strauss' actions.

We also observed that, in many cases, a student's most egregious experience of abuse did not occur during the student's first encounter with Strauss; rather, the abuse escalated over time, in a series of examinations with the student. This is consistent with a process commonly known as "grooming," by which sex abusers gain access to potential victims in a series of steps that garner trust, establish control by the abuser, and create a dynamic of secrecy and isolation around the abuser's interactions with his victim.¹¹⁵

As noted at the outset of this Report, it is impossible for us to determine with any certainty the total number of students that Strauss sexually abused. However, based on the evidence located in this Investigation, we know that Strauss abused additional students whose accounts are not captured here.¹¹⁶

Lastly, we note that, in addition to the 177 firsthand accounts described above, we were contacted by 38 people who reported an abusive experience with a physician at OSU Student Health Services during the relevant time period, but who were uncertain whether their treating physician was Strauss, or—in one case—who reported an abusive experience with a different OSU Student Health doctor.¹¹⁷ We excluded these reports from our total, given that the students could not positively identify Strauss.¹¹⁸

B. Spectrum of Sexual Abuse/Abusive Conduct

The reports of abuse date back as early as 1979 and continued consistently until Strauss' retirement from OSU in March 1998. Approximately 80 of the 177 reports occurred during Strauss' first ten years at OSU, while the remaining 97 occurred during his second decade at the University.

¹¹⁵ See *Grooming Dynamic*, NAT. CTR. FOR VICTIMS OF CRIME, <http://victimsofcrime.org/media/reporting-on-child-sexual-abuse/grooming-dynamic-of-csa> (last visited May 14, 2019); see also *United States v. Young*, 613 F.3d 735, 739 n.3 (8th Cir., 2016) ("The purpose of [grooming] is to build a trusting relationship between the two parties.").

¹¹⁶ Cf. *Repeat Offenders Often Targeted Vulnerable Patients*, ATLANTA J.-CONST. (Apr. 26, 2018), http://doctors.ajc.com/among_worst_cases/ ("By sheer numbers of victims, some physicians are among the nation's worst sex offenders, experts say. The most notorious doctors victimized 1,000 or more patients.").

¹¹⁷ Perkins Coie informed this student that our investigative mandate was strictly limited to Strauss, and provided him with information on how to report his experience anonymously to OSU. Separately, at his request, we shared the underlying facts of the student's report, including the name of the (deceased) physician, with OSU, while maintaining the student's anonymity.

¹¹⁸ We also provided these individuals with contact information for OSU's Title IX office and encouraged them to report abuse regarding physicians other than Strauss.

Broadly speaking, we found that Strauss' sexual abuse/abusive conduct fell into five primary categories, and generally along a spectrum that ranged from extensive fondling or other physical sexual stimulation at one end, to non-physical abusive conduct at the other end (i.e., involving no physical touching of the student, or inappropriate conduct with student-patients outside the context of a medical examination).

- The first category includes any student who reported that, in the context of a medical examination, Strauss sexually abused them to the point that they reached ejaculation or near ejaculation;
- The second category includes any student who reported that, in the context of a medical examination, Strauss sexually abused them to the point that they reached erection or near erection;
- The third category includes any student who reported that, in the context of a medical examination, Strauss either "fondled" or "groped" their genitals, or that Strauss conducted a medically unnecessary genital or rectal examination;
- The fourth category includes any student who described examination techniques used by Strauss that we determined to be inappropriate/sexually abusive, including: (i) unnecessary nudity; (ii) excessive touching of non-genital/non-rectal areas of the student's body; (iii) inappropriate verbal commentary or questioning of a sexually charged nature; (iv) lack of medical gloves for genital examinations; (v) unnecessarily invasive physical positioning; (vi) medical treatment outside a clinical setting (including in Strauss' home); and (vii) "quid pro quo" arrangements (e.g., receiving a "doctor's note" in exchange for submitting to an unnecessary genital examination);
- The fifth category includes any student who described inappropriate and sexually abusive conduct by Strauss outside of a medical examination setting, including Strauss regularly showering alongside student-patients, Strauss loitering in various student-athletes' locker rooms and engaging in sexually voyeuristic/"leering" behavior, and Strauss initiating various acts of fraternization with his student-patients, consistent with "grooming" methods frequently employed by sexual predators.

To provide an overview of where the student accounts fell along that spectrum, and given the volume and nuance, we have illustrated this data in three ways.

Chart 1.

First, we allocated each of the 177 student accounts to the category of abuse along the spectrum that we considered *most representative* of the incident(s) each student described to us. This was done to avoid any confusion that could arise from "double-counting," and was distributed as follows:

Distribution of 177 Students Reporting Abuse

Category of Abuse (Most Representative)	Number of Students (Single Count)
Ejaculation/Near Ejaculation	10
Erection/Near Erection	34
Genital Fondling/Groping; Medically Unnecessary Genital/Rectal Exams	99
Other Abusive Exam Techniques	20
Fraternization/Voyeurism/Grooming	14
Total	177

Chart 2.

Second, and so as to not inadvertently understate the number of accounts we received for each *category*, we separately counted the total number of accounts in each category of abuse across the full universe of 177 students. This method allows for a student who experienced multiple categories of abuse to be accounted for in each applicable category, as follows:

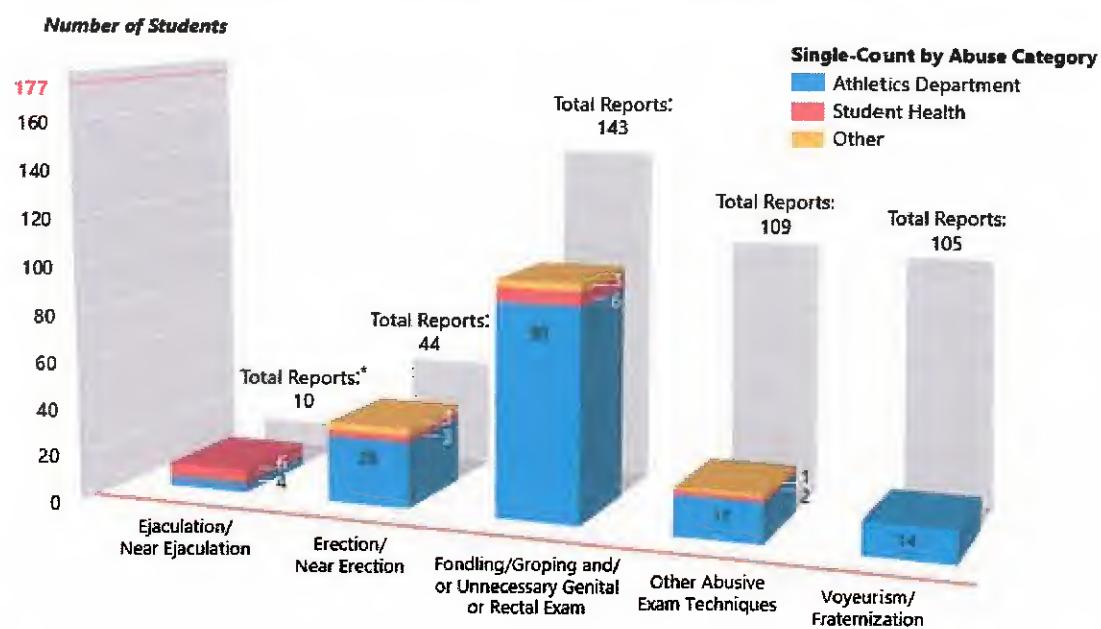
Total Number Reporting Abuse Type

Category of Abuse	Total Number Reporting (out of 177)
Ejaculation/Near Ejaculation	10
Erection/Near Erection	44
Genital Fondling/Groping; Medically Unnecessary Genital/Rectal Exams	143
Other Abusive Exam Techniques	109
Fraternization/Voyeurism/Grooming	105

Chart 3.

Third, we combined the above two datasets in one graphic to illustrate the distribution of the abuse accounts from the 177 students, including the student's affiliation¹¹⁹ with Strauss (e.g., Athletics, Student Health, or Other):

Distribution of 177 Students Reporting Abuse



As illustrated in the chart above, 153 of the 177 students reporting abuse were primarily affiliated with Strauss through his role in Athletics, and 17 of the 177 students were primarily affiliated with Strauss through his role in Student Health. Of the remaining seven students, two were participants in Strauss' medical studies, two were patients at Strauss' off-campus private medical clinic, and three met Strauss through other miscellaneous ways.¹²⁰

¹¹⁹ Some students' affiliations with Strauss spanned more than one category—for example, he treated many student-athletes in the Student Health Center, and he treated some student-athletes at his private off-campus men's clinic. For cases such as those, we categorized the student according to the category we considered to be the primary affiliation with Strauss, to avoid a double-counting scenario.

¹²⁰ As noted in the previous footnote, these categories were not always mutually exclusive. For example, several student-athletes participated in Strauss' medical studies, or were treated by Strauss at Student Health or at his private off-campus men's clinic, where they were sexually abused by him.

In the Section that follows, we summarize in detail the range of sexually abusive conduct described by the students interviewed by the Investigative Team. Given the high volume of student accounts, we have not described each case, but have instead selected several illustrative examples for discussion. The accounts are graphic and, in many cases, were shared with a high degree of concern about confidentiality. For that reason, we have eliminated any extraneous detail that might unnecessarily compromise the anonymity of the students.

C. Strauss' Abuse of Students Affiliated with OSU Athletics

1. Overview of Student Accounts of Abuse

Of the 177 students who provided firsthand accounts of sexual misconduct committed by Strauss, 153 were student-athletes affiliated with various intercollegiate teams at OSU, students employed or otherwise affiliated with University Athletics, or students involved in non-varsity club sports at OSU.

The number of student-athletes reporting abuse for each relevant team affiliation were as follows: wrestling (48 students); gymnastics (16 students); swimming & diving (15 students); soccer (13 students); lacrosse (10 students); hockey (7 students); track & field (7 students); baseball (7 students); cross-country (4 students); fencing (4 students); volleyball (4 students); tennis (3 students); football (3 students); cheerleading (2 students); and golf (2 students). The additional students we considered "affiliated" with Athletics were student-employees (6 students) and club sport participants (2 students).

Notably, more than half of the abuse reports came from student-athletes whose teams were assigned to Larkins Hall (wrestling, gymnastics, swimming & diving, and fencing), which was the practice facility where Strauss was primarily based as a team physician. We also received reports describing Strauss' abuse of student-athletes at a number of locations across campus, including: Woody Hayes Athletic Center, French Field House, Ernie Biggs Athletic Training Facility, St. John Arena, OSU Ice Rink, Ohio Stadium, Jesse Owens Recreation Center, and Dodd Hall Rehabilitation Hospital.

2. Range of Abusive Conduct During Medical Exams

In most cases, the student-athletes we interviewed indicated that their first medical examination with Strauss took place in the context of a pre-season or "pre-participation" physical (also known as a "sports physical"). The purpose of a pre-participation physical evaluation is to ensure an athlete's safe participation in sports; it is generally much more limited in scope than a "regular" or "complete" physical examination.

Additionally, because Strauss served as the team physician for many of the student-athletes we interviewed, they were also expected to go to Strauss for treatment of other injuries or illnesses that arose during the season.

a. Extreme Manipulation or Stimulation of Genitals

Among the 153 students affiliated with Athletics who provided us with firsthand accounts of Strauss' abuse, four students¹²¹ described Strauss abusing them to point of ejaculation or near ejaculation, in the context of what was, ostensibly, a medical exam. Thirty-two students described Strauss fondling them to the point of erection or near erection.

External Physician Input. The External Physicians both stated that they never—in the entirety of their respective medical careers—experienced a single incident of a patient ejaculating during a medical examination. Moreover, the External Physicians agreed that any examination of the penis (causing erection or otherwise) during a sports physical was inappropriate. Rather, they explained that a sports physical should primarily focus on the student's medical history, a measurement of the vital signs, and a detailed cardiac exam, because the physician is specifically testing for conditions that would preclude the patient's participation in sports. As such, the examination of the penis would only be appropriate if a patient presented a medical issue specific to the penis (e.g., a urinary tract infection).

The External Physicians also indicated that, in their experience, incidents of a patient becoming erect (or almost erect) during a medical examination are rare. The External Physicians reiterated that while a normal physical (sports or otherwise) for male patients routinely involves a testicular exam and/or a hernia check, a testicular exam only requires about 15 seconds of direct testicular palpation, and a hernia exam may, if anything, only involve inadvertent touching of the scrotum, given the proximity to the inguinal canal. In either case, there should not be any deliberate, extended contact with the patient's penis.

(i) Unwanted Oral Sex

In two cases, Strauss' abuse escalated to the degree that he performed unwanted sex acts on student-athletes in an exam setting, including putting his mouth on the student's penis to perform oral sex. These incidents of abuse did not originate at this level of severity. For context, we provide a detailed description of one of the student-athlete's experiences below.

One student-athlete explained to the Investigative Team that, at his first examination with Strauss, which was a pre-participation physical during his freshman year at the University, Strauss spent more than five minutes inspecting and touching the student's genitals. At the end of the examination, Strauss invited the student-athlete out to dinner, which the student declined. Notably, as early as this student's freshman year, he had heard from other student-athletes that it was not uncommon for Strauss to take the male athletes out for meals and to pay for them. The student-athlete also explained that Strauss had a practice of initiating impromptu examinations

¹²¹ As illustrated in Chart 3, we received four accounts of abuse involving ejaculation (or near ejaculation) from students primarily affiliated with the Athletics Department, and six accounts of abuse involving ejaculation (or near ejaculation) from Strauss' student-patients at Student Health Services. Accounts of Strauss' abuse of student-patients at Student Health Services are provided below in Section V.D.

with him in non-clinical locations, such as locker rooms. Strauss would initiate the interaction by inquiring about a previous injury and stating that he needed to evaluate it. These interactions occurred in the evenings when few people were around. The student-athlete noted to the Investigative Team that he and his teammates trusted Strauss because they understood that Strauss was highly regarded as a respected specialist in sports injuries and steroid use, such that the students generally did not question Strauss' techniques or authority.

The student-athlete also explained to the Investigative Team that, in a subsequent freshman-year examination with Strauss, Strauss fondled the student's genitals to the point that the student believed Strauss was trying to cause him to ejaculate. The student told Strauss to stop what he was doing, at which point Strauss ended the examination with no further explanation. At a subsequent examination with the same student-athlete, when the student presented symptoms of strep throat, Strauss fondled the student's genitals to the degree that he brought the student to an erection.

The student-athlete's final encounter with Strauss culminated with Strauss putting his mouth on the student's penis to perform oral sex. The examination was initiated by Strauss, who inquired about one of the student's recent injuries. Strauss brought the student to an examination room and instructed the student to undress and sit at the edge of the examination table. Over the course of the examination, Strauss eventually put his mouth on the student's genitals to perform oral sex on him, and Strauss also removed his own pants. The student assumed that Strauss removed his own pants to indicate that he wanted the student to perform a sex act on him. The student left the examination room without performing any sexual acts on Strauss and, shortly after this incident, quit his team. The student did not report his abuse to his coach or to others at the University, noting that the student-athletes were generally expected to be "the manliest of men."

External Physician Input. The Investigative Team did not require input from the External Physicians to conclude that it was grossly violative of the doctor-patient relationship for Strauss to make sexual advances/perform sex acts on a student-patient, particularly in the context of a medical exam. However, with respect to other aspects of this student-athlete's account, the External Physicians stated that inspecting the student's genitals for more than five minutes as part of a pre-participation physical was excessive and inappropriate; that Strauss initiating impromptu examinations in non-clinical locations was inappropriate; and that any examination of the genitals was inappropriate when the patient presented symptoms of strep throat.

(ii) Fondling to Point of Erection/Near Erection

Thirty-two students affiliated with Athletics described being fondled to the point of erection, or near erection, during their medical exams with Strauss.

- One student-athlete explained that at his first pre-participation physical with Strauss, Strauss immediately instructed him to disrobe completely. Strauss then proceeded to sit with his face only "centimeters away" from the student's genitals, and then began to

touch and squeeze the student's penis for between 10 to 15 minutes until he brought the student to erection. Strauss made small talk while he was massaging and touching the student's genitals, asking the student about his background; at one point, Strauss touched his stethoscope to the student's penis. At no point during the physical exam did Strauss examine other parts of the student's body. Strauss ended the appointment by giving the student his contact information and inviting him to come over to his house. The student believed Strauss was inviting him for the purposes of sexual activity. The student quit his team following this incident with Strauss, and did not report the incident to anyone at the University because he was unsure if he was overreacting (the student grew up in a rural community and had never had a proper physical examination prior to his appointment with Strauss), and because he did not want to create an issue with someone he considered to be an authority figure.¹²²

External Physician Input. As noted above, the External Physicians indicated that any manipulation of the penis (causing erection or otherwise) during a pre-participation physical examination was inappropriate. The External Physicians also stated that requiring the student to remove all of his clothes and remain naked for the entire exam was inappropriate and not an acceptable practice. The External Physicians indicated that Strauss' positioning his face only centimeters from the student's genitals; touching the stethoscope to the student's penis; examining the penis for 10 to 15 minutes; and "massaging" the student's genitals were all inappropriate and medically unnecessary. The External Physicians also noted that it was not an acceptable practice for Strauss to not examine other parts of the student's body during the sports physical, nor for Strauss to solicit the student to come to Strauss' home (particularly when the student was in the compromising position of a medical exam).

- Another student-athlete ("Student D")¹²³ joined his team mid-year as a transfer student and was sent to Strauss for a pre-participation physical at Larkins Hall. During the examination, which Strauss performed without gloves, Strauss fondled Student D's scrotum and held the student's penis in his hand. Strauss manually stimulated Student D's penis to the point that Student D believed Strauss was attempting to cause an erection. While sitting with his face at eye-level to Student D's genitals (the student was standing), Strauss also reached around Student D's waist and grabbed the student's buttocks to pull him in closer to Strauss.

¹²² The student noted to the Investigative Team that he was later diagnosed with a congenital heart defect by another physician who asked him whether he had ever received a proper physical examination before. The other physician informed the student that any routine physical would have identified the heart condition.

¹²³ In certain cases throughout the Report, we assigned a unique alias to the student whose account of abuse we describe, particularly in cases where the same student is referenced multiple times throughout the Report (e.g., "Student A"). We did so simply to eliminate potential confusion to the reader due to the complexity of the details in the particular account; it was not necessary to do so in every instance. We adopted a similar practice with respect to other witnesses based on the complexity of the details in their individual accounts.

Subsequent to the initial pre-participation physical, Strauss required Student D to return for several visits before he cleared the student to compete; the same conduct occurred at each physical. Strauss told Student D that the repeated examinations were necessary because the student presented a varicocele in his scrotum.¹²⁴ Although questioned by the student, Strauss never articulated what “risk” was presented to the student-athlete by the varicocele. Eventually, Student D returned for another examination with Strauss and—because Strauss was unavailable—Student D was instead treated by a female physician who examined his scrotum for a matter of seconds and immediately cleared him to compete. The experience led Student D to conclude that Strauss had no justification for withholding his medical clearance up to that point, or for the extended, probing genital exams.¹²⁵

Student D also stated that Strauss required him to submit to multiple drug tests. Strauss told the student that the drug tests were “random” and required Student D to provide urine samples. To collect the urine specimens, which occurred one-on-one, Strauss physically entered a bathroom stall with Student D and bent over so his face was near the student’s penis. Strauss told Student D that he needed to see the urine “actually come out” of the penis.

Student D believed that the physical exams and the drug tests that Strauss required him to undertake were attempted sexual overtures by Strauss. However, Student D never discussed his experience with Strauss with his teammates or anyone else at the University, largely because, as a transfer student, he did not know anyone well enough to confide in them.

External Physician Input. The External Physicians indicated that it was inappropriate for Strauss to reach around the student’s waist, grab the student’s buttocks, and pull the student closer to him. Rather, if a physician needs a patient to move closer during an examination, the physician should verbally request that the patient do so, not physically force the patient to do so.

The External Physicians also stated that a varicocele—which is a dilated vein in the scrotum—is very common (affecting one out of every seven men) and most often benign and harmless. The External Physicians agreed there was nothing in the student’s account that would warrant several follow-up visits or a prolonged withholding of clearance to compete.

Finally, with respect to the urine testing, the External Physicians explained that a “witness” sample—which requires a physician to observe a patient supplying a urine sample—is not in and of itself problematic, but that Strauss’ close proximity to the patient’s penis during the witness sample (as described by Student D) was inappropriate. Both External Physicians

¹²⁴ Student D told the Investigative Team that previous physicians had identified the varicocele but only conducted a scrotal examination that lasted a few seconds. Further, Student D stated that no prior physician ever told him that he could not compete in athletics due to the condition.

¹²⁵ Student D did not inform the female physician that Strauss had been performing extended genital exams on him.

explained that they typically stand a few feet away from the patient when conducting a “witness” sample.

b. Prolonged or Medically Unnecessary Genital and Rectal Exams

Among the 153 students affiliated with Athletics who provided us with firsthand accounts of Strauss’ abuse, 122 students described being subjected to genital fondling or groping, and prolonged or medically unnecessary genital and/or rectal exams. Many students explained that Strauss claimed that he was checking the lymph nodes in their groin area for possible signs of infection, even when presenting a condition such as a head cold.

As noted above, the External Physicians explained that manipulation of a patient’s genitalia is (and was) not part of a normal physical. Additionally, unless a patient had complained of a specific issue related to the prostate or anus/rectum, then a digital rectal examination is not medically necessary or appropriate. With respect to reports that Strauss claimed he was checking for swelling in the “lymph nodes” when conducting genital examinations on students who were seeking treatment for unrelated issues—including strep throat, cauliflower ear, and a mosquito bite—the External Physicians disagreed with Strauss’ justification, explaining that a physician should check for swelling in the lymph nodes near the body part at issue. With strep throat, for example, the lymph nodes in the neck swell, not the lymph nodes in the groin.

Additional cases illustrating Strauss’ performance of prolonged or medically unnecessary genital and rectal examinations on students are provided below:

- One student-athlete stated that, during his freshman year pre-participation sports physical with Strauss, Strauss fondled the student’s penis and testicles for approximately 60 seconds. Strauss also instructed the student to stand and turn his back towards Strauss, and then reached around the student’s waist to feel the student’s genitals from behind, with Strauss’ body pressed against the student’s back. Later that same year, the student seriously injured his hamstring and needed to see Strauss for treatment several times. During these examinations, Strauss digitally penetrated the student’s rectum, claiming that he needed to do so to determine whether there was “internal tearing.” The student believed Strauss was attempting to bring him to erection through the rectal penetration.

External Physician Input. The External Physicians explained that a hamstring injury does not necessitate a rectal examination, and that a rectal examination was not appropriate in this case. Additionally, the External Physicians said that it was not an acceptable medical practice for Strauss to reach around the student’s waist to feel the student’s genitals from behind.

- Another student-athlete (“Student E”) explained that Strauss performed his annual pre-participation physicals every year and that each of the exams took place one-on-one in a closed door setting at an OSU Athletics facility. The physicals performed by Strauss included an extensive focus on Student E’s genitals, and Strauss would sit on a stool with

his face eye-level to the student’s groin. From that position, Strauss “fondled” the student’s penis for an extended period of time (in excess of 5 minutes). Student E felt that he had no ability to question Strauss given that Strauss had the power to determine whether or not Student E would receive medical clearance to compete, particularly given that he was at OSU on an athletic scholarship.

However, during Student E’s sophomore year, he injured his hamstring and sought out a different team physician to avoid being examined by Strauss. The physician (whose name Student E could not recall) asked Student E why he had not gone to see Strauss, and Student E told the physician about the extensive genital exams that Strauss performed on him. According to Student E, the physician looked concerned and left to summon a supervisor. The physician returned with Dr. Bob Murphy, the Head Team Physician at the time.¹²⁶ Student E repeated his description of his exams with Strauss for Murphy and observed that the two physicians exchanged a look with one another. Student E expected that an action would be taken against Strauss, given the apparent concern he perceived from the physicians. Instead, later that night, Student E received a phone call from Strauss, inquiring about Student E’s injury. Strauss made no mention of speaking with the other physicians, and Student E never heard anything further from Murphy (or the other team physician who examined him).

External Physician Input. As noted above, a pre-participation physical does not involve any examination of the patient’s penis—let alone extended touching for several minutes or longer. Additionally, the External Physicians noted that sitting eye-level with the student’s groin for any part of a sports physical, including a testicular examination, was medically unnecessary.

- Another student-athlete explained that Strauss diagnosed him with a sexually transmitted disease (“STD”) and told the student that the disease could only be treated by using tweezers to remove “nodes” on the student’s penis. During the “treatment,” Strauss grabbed the shaft of the student’s penis and dug the tweezers into the penis tip, causing the student to bleed. Strauss dabbed the bloody sites with a swab and continued to tweeze the student’s penis. When the student backed away from the excruciating pain caused by Strauss’ tweezing, Strauss held the shaft of the student’s penis and instructed him to “hold still.” When the student could no longer endure the pain, he told Strauss he had to leave. Strauss told the student that he had not “fully treated” the STD, but Strauss did not prescribe any medication to the student or attempt to schedule a follow-up visit. The student never went back to Strauss for treatment, and still has physical scars on his penis from the experience.

External Physician Input. From the facts provided, both External Physicians speculated that the former student-athlete may have contracted molluscum contagiosum, a pox virus that can be considered an STD if the lesions are presenting near the genital region. However, the

¹²⁶ A summary of the evidence we identified concerning Dr. Bob Murphy’s knowledge of complaints about Strauss is discussed further in Section VI.A. Murphy passed away in 2003.

External Physicians indicated that molluscum contagiosum would not normally be treated with tweezers, and also noted that Strauss should have stopped the procedure if it was apparent that the treatment was causing the patient “excruciating pain.”

c. Other Inappropriate and Abusive Practices

As described below, we received extensive student accounts regarding inappropriate exam techniques employed by Strauss with his student-patients, including unnecessary nudity, unnecessary physical touching of the student’s body, and use of inappropriate language and commentary. We found these exam techniques to be sexually abusive.

External Physician Input. Generally speaking, the External Physicians explained that, per the American Medical Association guidelines, doctors learn in early medical training that a professional relationship requires a “barrier” or “some sort of separation” between physician and patient. These barriers are both physical (i.e., the generally accepted practice of wearing gloves for examinations of the body) and social (i.e., it is against the norm for a physician to fraternize with a patient). The boundaries established between a physician and a patient exist to protect the patient. The External Physicians indicated that many of Strauss’ exam techniques and other practices (e.g., social fraternization) broke down these barriers between Strauss and his student-patients.¹²⁷

(i) Unnecessary Nudity

Thirty-one students described incidents in which Strauss required partial or full nudity of the student, inconsistent with what would be required for any legitimate medical purpose. For example, one student-athlete (“Student F”) explained that, during each of his three physical examinations with Strauss, Strauss instructed Student F to fully undress so that Strauss could “check his skeletal muscles.” Strauss then caressed Student F’s shoulders, back, lower back, and abdominals, finishing with a scoliosis check. For the scoliosis examination, Strauss instructed Student F to bend over an exam table while Strauss ran his hands over the student’s spine and buttocks. Student F characterized this touching as “groping” or “fondling.” Next, Strauss conducted a hernia check, which Strauss performed while seated with his face at eye-level with Student F’s penis. Student F explained that Strauss used one hand to hold the student’s penis out of the way with a firm grip and then instructed Student F to spread his legs. Strauss then reached

¹²⁷ Consistent with the input we received from the External Physicians, the State Medical Board of Ohio’s 1989 “Position Paper” governing “[p]atient complaints of sexual misconduct by physicians” provided a number of “guidelines . . . advocated as policy by the State Medical Board,” including that patients should “be assured [of] adequate auditory and visual privacy and should never be asked to disrobe in the physician’s presence,” and that “[g]owns, sheets and/or other appropriate apparel should be made available to protect patient dignity” while performing an examination. Fax from Marcia Barnett to Judy Brady (July 25, 1996) [CTRL_HC_00007560–61] (quoting Ohio State Med. Bd., Position Paper: Physical Examinations by Physicians (Mar. 8, 1989)). The Position Paper also provided that it was “incumbent upon the physician to inform the patient of the option to have a third party present” and that such “precaution [was] essential regardless of physician/patient gender.” Ohio State Med. Bd., Position Paper: Physical Examinations by Physicians (Mar. 8, 1989) [CTRL_HC_00007561].

both hands between Student F’s legs to conduct the hernia check. At a separate examination with Student F, Strauss performed a similar scoliosis exam when the student sought treatment for a shoulder injury. During that exam, Strauss instructed Student F to walk across the room fully naked, which Strauss said was necessary for him to assess Student F’s gait.

We heard from other students that Strauss also performed scoliosis exams on them during routine physicals or when they saw him for an unrelated illness or injury, instructing them to bend over an examination table while they were fully undressed. Several other students also stated that Strauss instructed them to walk along an exam room or hallway, fully undressed, so that Strauss could purportedly analyze their gait, and one student who sought treatment for a head laceration was instructed by Strauss to completely undress so that Strauss could perform a full body exam.

External Physician Input. As noted above, the External Physicians indicated that requiring a patient to remove his clothes and remain naked for an entire physical examination was not a medically necessary or acceptable practice in the above-described scenarios. The External Physicians noted that even patients complaining of hip or groin issues should be able to keep their underwear and/or shorts on for examinations. The External Physicians explained that assessing a patient’s gait is a legitimate practice, but that a patient does not need to be naked for a physician to assess the patient’s gait.

The External Physicians further noted that, in a proper scoliosis check, a physician would instruct the patient to remove his shirt, stand, bend over, and touch his toes; the exam is visual, with no need for the physician to touch the patient. The External Physicians also stated that requiring a patient to completely undress and submit to a full body examination for a head laceration was inappropriate.

(ii) Other Excessive Touching and/or Groping

Forty-two students described incidents in which Strauss subjected them to medically unnecessary excessive touching (non-genital, non-rectal) during their exams, including excessive touching and “groping” of the student’s upper body, “rubbing” of the student’s thigh, and “cupping” of a student’s buttocks.

In one such example, during a student-athlete’s first pre-participation physical with Strauss, Strauss instructed the student to take off his clothes and to lie with his back on the examination table. Strauss spent 15 minutes inspecting the entirety of the student’s upper body, and told the student to “just relax” and “close [his] eyes.” When the student asked why this inspection was necessary, Strauss responded that he was checking for male breast cancer. After the upper body exam, Strauss instructed the still-undressed student to get off the table and to stand at the other end of the long room. Strauss sat on a stool at the other end of the room and instructed the student to walk toward him, back and forth, three times. The third time, Strauss instructed the student to “come close” so that the student’s genitals were at Strauss’ eye level.

Without gloves, Strauss conducted a hernia exam, instructing the student to cough five or six times.

External Physician Input. The External Physicians indicated that spending 15 minutes inspecting the student's upper body during a pre-participation physical was not an acceptable practice. The External Physicians added that breast cancer is "almost unheard of" in college-aged men. As noted above, the External Physicians also noted that Strauss' technique for the student's gait assessment was inappropriate. Lastly, the External Physicians stated that conducting a hernia examination, without gloves¹²⁸ and with the patient's genitals positioned at Strauss' eye level, was not an acceptable medical practice.

(iii) Verbal Commentary and Questions

Ten students described verbal commentary and/or questioning from Strauss that was inappropriate and medically unnecessary. For example, several student-athletes reported that Strauss made inappropriate comments about their bodies and appearance. In one case, Strauss told a student-athlete that the student had a "nice-size penis;" in another case, Strauss asked a student-patient how long his erections lasted and how quickly he ejaculated (the student-patient in question had not sought medical treatment from Strauss pertaining to any sexual performance issue).

Strauss also questioned other student-athletes about their personal lives and sexual habits. Strauss asked one student-athlete about where he went on dates and the types of things that he would do on dates. Another student-athlete remembered that, while Strauss was holding the student's penis and turning it over with his hands, Strauss commented that it looked like the student had been "having fun," using a tone of voice and smile that made the student uncomfortable.

External Physician Input. The External Physicians indicated that comments regarding a patient's physique (e.g., tan lines, "nice size penis," "nice pecs"), sexuality, and/or sexual "desires" during a physical examination were inappropriate and unnecessary. The External Physicians explained that questions about sexual health are generally not included in a pre-participation physical examination. The External Physicians added that questions about sexual health, including whether a patient was sexually active, may only have been medically relevant for a regular (non-sports/non-pre-participation) physical, or if the student was showing specific symptoms of an STD. The External Physicians confirmed that even if a student was showing specific symptoms of an STD, questions about how long erections lasted and "premature ejaculation" would be inappropriate.

¹²⁸ Further discussion regarding gloving practices is provided below.

(iv) Gloving Practices

Forty-six students indicated that Strauss did not wear gloves or only “sometimes” wore gloves when performing genital examinations on them. Among the types of exams that student-athletes recalled Strauss performing without gloves were hernia exams, testicular exams, inspection of inguinal lymph nodes, an exam for pubic lice, and a genital exam for poison ivy.

External Physician Input. The External Physicians confirmed that not wearing gloves for an inspection of the genital region was not an acceptable practice, even during the relevant time period of Strauss’ employment at OSU (1978–1998). The External Physicians explained that wearing gloves was a practice learned in early medical training, not only for hygiene purposes but also to create a physical and “social” barrier between the physician and the patient.

(v) Physical Positioning/Invasion of Space

Eighty-five students described incidents in which Strauss positioned himself near the student in a physically invasive manner that was neither appropriate nor necessary for medical treatment. For example, 70 students described how Strauss would sit on a stool with his face very close to his patients’ genitals while performing a hernia or other genital exam. Several student-athletes recounted experiences in which Strauss’ mouth was close enough to the student’s penis during an exam that they were afraid that Strauss was going to put his mouth on the penis. One student-athlete described the distance as a “tongue’s length” away, and another recalled feeling Strauss’ breath on his penis, due to the close proximity.

External Physician Input. The External Physicians indicated that a physician would typically sit about 10 to 12 inches away from the patient’s genitals while performing an examination of the genital region (a distance significantly farther than described by many of the students who received exams from Strauss). They reiterated that professionalism requires a physician to respect a patient’s physical space, to respect a patient’s dignity, and to avoid making the patient feel uncomfortable.

(vi) Treatment Outside Clinical Settings

Ten students indicated that Strauss conducted medical examinations on them in a non-clinical setting, including five students who were treated by Strauss at his personal residence. The exams that took place in Strauss’ home included examinations in a bedroom.

- When one student-athlete contracted pubic lice, he telephoned Strauss and was instructed to meet Strauss at his home. There was no one else in the home when Strauss examined the student in a front room. Strauss instructed the student to remove his pants, and proceeded to examine the student’s genitals for approximately 10 minutes, during which Strauss “rubbed” and “massaged” the student’s penis and testicles.

External Physician Input. The External Physicians confirmed that it was not an acceptable practice for a physician to conduct medical examinations outside of an examination

room, let alone in the physician's own home. Additionally, "massaging" the student-athlete's genitals for 10 minutes was inappropriate conduct. Although some examination of the genitals may have been appropriate if Strauss had reason to believe that the patient had contracted another STD (in addition to pubic lice), even in that case, a 10-minute genital examination would be excessive.

- Another student-athlete was instructed by Strauss to meet him at his private faculty office to be seen for a hip injury. The student emphasized that the office was not located in the Larkins Hall training office, or any other medical office, and that the office did not have an examination table, a sink, or any other typical equipment found in a medical office.

External Physician Input. The External Physicians agreed that examining the student-athlete's hip injury in Strauss' private faculty office was inappropriate. A private faculty office would have neither a sink to wash hands, nor an examination table, which would be critical to properly examine the hip.

- Another student-athlete described encountering Strauss in the Larkins Hall locker room soon after returning from summer break. Strauss approached the student, who was only wearing a towel, and asked the student about his sexual encounters during the summer. Strauss asked the student if he had "kept clean," and then Strauss dropped to his knees, removed the student's towel, and began performing a genital exam on the student. At that point, the student reached down and pulled Strauss up by the shoulders, telling him he had "had enough." After this incident, the student-athlete went to see his family physician back home and requested that his family physician provide him with a medical note so that the student would not need to be examined by Strauss again. However, for unrelated reasons, the student stopped participating in his sport and was not required to be seen by Strauss again.

External Physician Input. Regarding this account, the External Physicians agreed that Strauss' commentary was inappropriate, and that performing a genital examination in a public place was inappropriate and violative of a patient's privacy. The External Physicians added that this conduct violates the code of professionalism that is taught to physicians in medical school.

(vii) "Quid Pro Quo" Arrangements

One student who worked as an assistant to a men's varsity team stated that it was "common knowledge" among the student-athletes and other students involved in University athletics that Strauss would provide a doctor's note to excuse someone from class if the student agreed to submit to a physical examination with Strauss. As described by the student, he once requested a doctor's note from Strauss and, before providing the student with the note, Strauss required the student to submit to a physical. During the physical, Strauss performed a testicular exam on the student and told the student that testicular cancer was "very common" for college-aged men. The student also recalled that Strauss inquired about the student's sexual history, although not in a graphic or excessively detailed manner.

External Physician Input. The External Physicians commented that the described “quid pro quo” arrangement was unethical and unprofessional. Further, the External Physicians stated that a testicular examination of the student would only have been appropriate if the student had presented testicle-related symptoms. Additionally, the External Physicians again noted that sexual history was not the kind of patient history that would be relevant for a physical examination.

3. Range of Abusive Conduct Outside Medical Exam Context

a. Shower and Locker Room Conduct

Eighty-four students described incidents (or repeated incidents) of Strauss’ showering with student-athletes in various locker rooms, and/or otherwise loitering or watching student-athletes as they were nude or undressing. These accounts were not limited to the primary men’s locker room at Larkins Hall, but included St. John Arena, Ohio Stadium, French Field House, and Woody Hayes Athletic Center.¹²⁹ No students reported that any team physician—other than Strauss—showered with them or otherwise loitered in the locker room while they were changing.

- One wrestler told the Investigative Team that Strauss would typically occupy a corner space in the showers at Larkins Hall where he would excessively lather his genitals while watching the wrestlers shower. Numerous other witnesses reported that Strauss would time his showers to coincide with the wrestling team, taking up to 45-minute showers while staring at the wrestlers and their genitals.
- A gymnast told us that Strauss showered as many as six times a day and took long showers with the gymnastics team. A swimmer reported to the Investigative Team that Strauss would loiter in the locker room and watch the swimmers change, openly observing their bodies.
- A soccer player recalled that Strauss would shower with the soccer team frequently, explaining that Strauss would lightly exercise, for example by running a single lap at the stadium, just before the end of the soccer team’s practice. The student noted that it was a commonly-held perception among the players that Strauss was exercising as a pretext to shower with the team, and the student-athletes would try to shower as quickly as possible.

¹²⁹Additionally, the Investigative Team was contacted by a non-student regarding Strauss’ inappropriate sexual conduct in the locker rooms. The individual was a former NCAA athletics officiant who, in the late 1980s or early 1990s, was followed by Strauss into the showers in the officiant locker room at St. John Arena. Strauss began showering right next to the officiant, staring at the officiant’s penis while Strauss was soaping his own genitals excessively. Strauss then commented on the size of the officiant’s penis and his physique. The officiant believed that Strauss was masturbating, and left the showers quickly. Strauss quickly rinsed off and followed the officiant out, still commenting on the officiant’s penis and physique. We did not count this incident among the “accounts of abuse” given that it did not involve a student-patient, but considered the account corroborative of Strauss’ inappropriate sexual behavior in the OSU locker room facilities.

External Physician Input. We consulted with the External Physicians regarding Strauss' frequent visits to the showers and the locker rooms when students were nude and/or undressing. The External Physicians indicated that such visits to the locker rooms were inappropriate and constituted a breakdown of the accepted boundaries between patient and physician. One physician recalled that in his many years traveling as a team physician, he showered in the same locker room as the student-athletes on only one occasion, and on that occasion, he and the trainers waited until the student-athletes were finished using the locker room before they showered. The other External Physician reported that he could not recall ever showering in the same locker room as student-athletes when serving as a team physician.

b. Photography Sessions

Sixteen students indicated that Strauss solicited them to participate in private, individualized photography shoots, or that Strauss took pictures of student-athletes in the locker room.¹³⁰ As described below, using the pretext of a photography session, Strauss encouraged the students to undress and, at times, made sexual advances during the one-on-one sessions.

- One student-athlete explained that Strauss invited him and another student-athlete to sit for photos at Strauss' house, claiming that he was publishing a photobook on athletes. The student was flattered to be included since Strauss named some of the athletes who had previously posed for him, several of whom were Olympians. The student asked his teammates if any of them had done photos with Strauss and several of the upperclassmen said they had, which gave the student comfort. When the student arrived at Strauss' house, there was no one in the house but him and Strauss. Strauss showed the student some of his prior photos (the student remembered seeing photos of at least 20 to 30 athletes). Strauss proceeded to take a number of photos of the student, including many in which the student wore no shirt. The student said that while Strauss was a little awkward, nothing happened that he felt was out of the ordinary.

However, several months later, Strauss solicited the student to return to his house to view the photos from the first session. After showing the student the photos, Strauss suggested that they take more photos. Strauss gave the student a white wrestling singlet to wear, telling the student he had "the physique of a wrestler." At one point during the photo shoot, Strauss said he wanted to fix a shadow, walked over to the student, bent down on one knee, put his hand on the student's genitals and moved them from side to side. He then crouched with his hand on the student's genitals and looked up at him, seemingly gauging whether the student was interested in a sexual encounter. The student jumped back, changed out of the singlet, and made an excuse to leave. Strauss tried to encourage him to stay, but the student gathered his things and left the house. The student never saw the photos from the second session and never returned to Strauss' home.

¹³⁰ For purposes of this section, we are excluding reports that Strauss frequently took photographs of student-athletes at public events such as practices and meets.

External Physician Input. As noted above, the External Physicians stated that the professional relationship between a doctor and a patient requires a “barrier” or “some sort of separation” between physician and patient, including social barriers. Strauss’ practices of soliciting student-patients to his home (or elsewhere) for fraternization was a violation of those professional barriers, which exist to protect patients.

- We were contacted by another student who was not a student-athlete but who occasionally volunteered to practice with one of the OSU athletic teams (“Student G”). Upon meeting, Strauss told Student G that he was a photographer and asked Student G if he had ever modeled. Strauss then offered to take professional shots of Student G, and the student agreed to meet Strauss for an outdoor photography session. Strauss instructed Student G to remove his shirt for the photographs, but nothing further occurred.

However, several weeks later, Strauss contacted Student G to meet so that Strauss could provide him with copies of the photos they had taken. Student G recalled that he met Strauss outdoors and that Strauss brought food for them to eat. During lunch, Strauss questioned Student G about his personal life and commented that Student G “must be getting a lot of [sexual] action.” Unprompted, Strauss also told Student G about his own sex life with his wife. When Student G asked Strauss for the photos, Strauss said he had left the photos in his office and they would need to go there to retrieve them.

Strauss and Student G then went to an office which the student believed was a faculty office (versus a medical office or examination room). While there, Strauss began asking Student G about his medical history and then spontaneously offered to give Student G a physical exam. During that exam, Strauss took out his stethoscope and eventually worked his way down to Student G’s genitalia; Strauss fondled Student G’s penis to semi-erection, at which point Student G stopped Strauss and got ready to leave. According to Student G, Strauss tried to pretend as if nothing had happened, and offered to take more photographs of the student. Student G left and avoided Strauss thereafter.

External Physician Input. As noted above, the External Physicians explained that manipulation of a patient’s genitalia is (and was) not part of a normal physical. Additionally, the External Physicians confirmed that it was not an acceptable practice for a physician to conduct medical examinations outside of an examination room.

c. Other Fraternization (Meals, Parties)

Twenty-five students reported that Strauss invited them—or them and some teammates—to meals at restaurants or gatherings at Strauss’ personal residence.

For example, one student-athlete recalled that Strauss took him and other teammates out to dinner on several occasions and paid for the group’s meal. Once, when the student-athlete attended a tournament in another city, Strauss took that student, along with four or five of his teammates, out to dinner. The student recalled that it was an expensive dinner and Strauss paid

for everything. Strauss also took that student to Wendy's and a few other restaurants in the Columbus area. The student recalled being thankful for these meals because he did not have much money at the time.

External Physician Input. The External Physicians reiterated that, as a baseline, a team physician fraternizing with students in social settings was not appropriate. The External Physicians noted that, while traveling with athletic teams, team physicians might join students for "team meals," but a physician would never fraternize with a student one-on-one.

D. Strauss' Abuse of Students in Student Health Services

As discussed in Section IV.C., Strauss began working in the Sports Medicine Clinic at Student Health Services in or around 1980, although he did not have a formal appointment at Student Health until July 1994, when he began a part-time appointment in the newly formed Student Health Men's Clinic. Witness interviews also indicated that Strauss occasionally instructed student-athletes to meet him at the Student Health Center for medical exams.

In addition to the 153 students affiliated with Athletics who provided firsthand accounts of Strauss' abuse to the Investigative Team, we also received accounts of abuse from 17 students (unaffiliated with Athletics) who were treated by Strauss at Student Health. Furthermore, we identified contemporaneous documentation of complaints against Strauss made by three student-patients from the Student Health Men's Clinic in 1995 and 1996, which are described in detail in Section VI.B.

1. Abuse of Student-Athletes at the Student Health Center

Five of the student-athletes who provided firsthand accounts of Strauss' abuse to the Investigative Team indicated that at least one abusive examination with Strauss took place in the Student Health Center.

- One student-athlete ("Student H") stated that Strauss performed multiple medical examinations on him in the Student Health Center, during which Strauss fondled the student's genitals. Student H explained that the examinations were first prompted when Strauss approached him and a fellow teammate in the locker room and told them that he thought they had STDs that required treatment.¹³¹ Strauss arranged for the students to meet him at the Student Health Center. During Student H's examination, Strauss grabbed and squeezed the student's penis to the degree that Student H believed that Strauss was attempting to masturbate him. Strauss never told the student what STD he purportedly thought the student had. Following this examination, Strauss showed up in the team's shower room, while Student H was showering, and asked Student H (in front of the student's teammates) if he was "watching what he was doing" based on his last exam.

¹³¹ According to the student, Strauss did not shower with the athletes on his team but would "pop his head" into the shower area to say something and then linger.

Student H also explained that he contracted mononucleosis later that same year and Strauss required him to come to the Student Health Center every two weeks for what was supposed to be a “spleen check.” During each appointment, Strauss required the student to strip completely naked; Strauss then performed a lengthy genital exam on Student H, in addition to checking the student’s abdomen. Student H explained to the Investigative Team that, at the time, he felt that he had no other option but to see Strauss for any medical problems that he had, given that Strauss was the team physician. Student H also remarked that, generally, Strauss’ odd behavior was an “open secret” in Athletics and so “consistent” and overt that it gave Student H the impression that it was considered “normal” within the Athletics Department.

External Physician Input. The External Physicians stated that approaching a group of students in a public setting and soliciting medical examinations was inappropriate and particularly problematic for privacy reasons. The External Physicians also indicated that a spleen check would have been appropriate for a patient presenting with symptoms of mononucleosis; however, a spleen check would not require the patient to undress completely. At most, a physician might instruct a patient to take off his shirt only.

- Another student-athlete explained that he was absent for his team’s group physical examination day and had to schedule a make-up examination with Strauss. Strauss instructed the student to meet him at the Student Health Center. Strauss required the student to undress from the waist down and pulled up a chair so that his face was near the student’s genitals. Strauss then proceeded to grab and manipulate the student’s genitals, and commented that the student’s scrotum was “very tight.” Strauss pulled on the student’s scrotum, and the fondling caused the student to become erect. Strauss ended the exam shortly after.

External Physician Input. The External Physicians confirmed that Strauss’ commentary concerning the student’s scrotum was unprofessional, inappropriate, and carried no clinical significance. The External Physicians noted, again, that pre-participation physical examinations do not require such “grabbing” and “manipulation” of the genitalia.

2. Abuse of Other Students (Non-Athletes)

We received firsthand accounts of abuse from 17 non-athlete students who were treated by Strauss at Student Health. Almost all of these incidents took place in the early and mid-1990s, but a few occurred in the 1980s. Nine students reported that Strauss abused them to the point of ejaculation, near ejaculation, erection, or near erection; six reported that Strauss conducted prolonged or medically unnecessary genital or rectal exams; and two reported that Strauss utilized other inappropriate or abusive practices during their exams.

The Investigative Team also identified contemporaneous documentation of complaints raised against Strauss by three different student-patients of the Student Health Men’s Clinic—Students A, B, and C. Students A and B reported their complaints in January 1995, and Student

C reported his complaint in January 1996. Each of the three students complained about Strauss' conduct relating to genital and/or rectal exams that he administered on them. A full factual summary of the evidence we identified concerning the complaints raised by Students A, B, and C is provided in Section VI.B and C of this Report, where we also address how the University responded to the students' complaints against Strauss, at that time.

One particularly notable account of abuse took place in the 1990s, over a series of appointments with Strauss at the Student Health Center. The student ("Student J")¹³² saw Strauss for treatment of an STD. At the first exam, Strauss instructed Student J to stand, without any clothes on, so that Strauss could inspect his body. Strauss began fondling the student's penis until he brought Student J to erection and eventually to ejaculation. Strauss told Student J that the physiological response was "normal and not a big deal." Strauss required Student J to return for weekly visits, approximately seven to eight times, claiming that it was medically necessary to treat the STD. Student J was fondled to the point of erection at each exam. At each exam, Strauss required Student J to stand completely naked while he inspected his body for "warts." Student J further explained that Strauss did not wear gloves for the examinations, with the exception of one appointment when Strauss performed a prostate examination on the student.

There was never a nurse or other chaperone present during Student J's exams with Strauss. Student J recalled one incident in which a female nurse tried to walk into the examination room and Strauss shouted at her to get out. Strauss then moved to lock the door. Student J recalled feeling startled by Strauss' reaction, indicating that it made him question whether Strauss was doing something abnormal.

Student J's last appointment with Strauss began like the other examinations. Strauss instructed Student J to stand, completely naked, while Strauss inspected the student's body. Strauss again fondled Student J to the point of ejaculation. After the student ejaculated, Strauss then unzipped his own pants and masturbated, to the point of ejaculation, in front of Student J. Student J was "shocked" and quickly began gathering his clothes to leave. According to Student J, Strauss acted as though nothing had happened, telling Student J that he would see him again at their next appointment date. Student J never returned for treatment by Strauss or by any other practitioner at Student Health. Student J explained that he was too embarrassed to ever tell anyone about the experience.

External Physician Input. The Investigative Team did not require input from the External Physicians to conclude that it was grossly violative of the doctor-patient relationship for Strauss to masturbate himself in front of a patient during the patient's medical exam. Beyond that fact, the External Physicians indicated that almost every aspect of this student's experience—from being completely naked during exams to being fondled to erection and/or ejaculation—was inappropriate and well outside acceptable medical practices. Without more information, the External Physicians could not opine regarding the number of follow-up visits

¹³² We intentionally skipped the alias "Student I" so as to avoid subject pronoun confusion.

required by Strauss or the performance of a prostate examination. The External Physicians also indicated that it was not an acceptable medical practice to lock the door during an examination.

E. Strauss' Abuse of Student Participants in Medical Studies

The Investigative Team received seven firsthand accounts of abuse from individuals who participated in purported medical studies with Strauss (six OSU students and one non-OSU subject; four of the six OSU students were student-athletes).¹³³ In two of those seven cases, the participants affirmatively stated that they did *not* feel that they were abused; however, these participants described examination techniques or other conduct by Strauss that fell outside objective boundaries of acceptable doctor-patient interactions, as we determined through our consultations with the External Physicians.

The individuals we interviewed generally described the medical studies they participated in as relating to four different topics: (i) the effects of steroid use; (ii) the effect of heart medication on muscle performance; (iii) muscle development differences among athletes; and (iv) the effect of weight loss on hormone levels. Based on these accounts, the Investigative Team attempted to determine whether any of the studies described by the participants were published, whether Strauss obtained any necessary approvals at OSU to conduct the studies, and whether any complaints or concerns regarding Strauss were reported to the University, in connection with the studies.¹³⁴ We sought to determine whether the studies described were ever published in an effort to identify any details corroborative of the abuse accounts that we received from the study participants, as well as to identify any other witnesses who might have information corroborative of the abuse accounts (e.g., co-authors, graduate assistants, other University witnesses). Similarly, the issue of whether Strauss obtained—or did not obtain—required approvals from the University to conduct the studies was relevant to our investigative mandate to identify individuals within the University who knew—or arguably were in a position to know—about any complaints that may have arisen from student participants in the studies.

In the end, however, we found no evidence showing whether Strauss obtained University approval to conduct the potentially relevant studies involving human subjects; it is possible that he did obtain such approvals, but the records simply no longer exist.

In conducting this work, the Investigative Team identified and reviewed 84 publications authored (or co-authored) by Strauss.¹³⁵ After identifying four publications that appeared to be

¹³³ We did not include the abuse account from the non-OSU study participant in the calculation of the 177 students who provided firsthand accounts of abuse to the Investigative Team, given that this individual was not an OSU student.

¹³⁴ Some of Strauss' studies involved non-OSU minors (i.e., high school and middle school students), and are addressed separately in Section V.F.

¹³⁵ A full list of the publications reviewed by the Investigative Team can be found at Exhibit C. Strauss' curriculum vitae also contained a list of publications that were written during Strauss' time at OSU. See Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000811–21]. Additionally, Strauss served as the Editor-in-Chief of the medical journal *The Physician and Sportsmedicine* from 1986 to 1998. In each edition of the monthly publication,

potentially related to the studies described to us by the Investigation witnesses, we attempted to contact the five co-authors or co-researchers identified with the four potentially relevant publications. Ultimately, we were only able to interview one potentially relevant co-author, as two co-authors were deceased and two declined to participate in interviews with the Independent Investigation. As described further below, we confirmed with one study participant (“Student K”) that one of the four publications we identified included photographs of Student K, taken by Strauss, in connection with the study.

We did not locate any contemporaneous documentary evidence of complaints that were raised against Strauss concerning his examinations with participants in his medical studies. Additionally, with the exception of two studies that did not appear to be relevant to the Independent Investigation, the Investigative Team was unable to locate any evidence of University approvals for Strauss’ research.¹³⁶ At the end of this Section, we provide a summary of our findings with respect to the University’s approval process for studies involving human subjects that were in effect during the relevant time period.

1. Strauss’ Studies on the Physical Effects of Steroid Use

We received accounts from four individuals who told the Investigative Team that, between 1982 and 1987, they participated in medical studies conducted by Strauss that related to steroids. Each of the four individuals described conduct by Strauss that was objectively abusive, as described below.¹³⁷

- One student stated that, in 1983, Strauss paid him \$100 per assessment for his participation in a steroid study. The student recalled that Strauss performed underwater body fat assessments, measured the participants’ testosterone levels, and used calipers to measure for testicular shrinkage, as part of the study. The student explained that Strauss’ conduct during the assessments escalated over time. Specifically, in the student’s last assessment, Strauss manipulated the student’s penis to the point that Strauss caused the student to experience an erection. Strauss told the student not to “worry” because “this

Strauss published a one-page “Editor’s Note” wherein he introduced journal articles and related anecdotal observations from his own medical practice. A review of available Editor’s Notes did not reveal anything pertinent to this Investigation beyond confirmation of Strauss’ status as a recognized authority in the field of sports medicine.¹³⁶ An individual who served on the University’s Biomedical Human Subject Review Committee during the early- to late-1980s informed the Investigative Team that each researcher was responsible for maintaining his or her own research approval records. This may explain any difficulties in finding approvals for Strauss’ studies, assuming he obtained them. Additionally, in an August 15, 1983 letter from the chairman of the Biomedical Sciences Human Subject Review Committee to the Associate Vice President for Research, the chairman notes that “In the course of our review process over the last several years, it has become apparent that many faculty members have never read the university guidelines that regulate the conduct of research on campus involving human subjects. . . . I strongly recommend that a copy of the new [1984] guidelines be distributed to every full-time faculty member in the area of health sciences.” Letter from Hagop S. Mekhjian to Thomas L. Sweeney (May 16, 1984) [CTRL_HC_00001873].¹³⁷ We also received a secondhand report from one person alleging that Strauss provided steroids to participants in connection with the steroid studies. However, none of the direct participants in the steroid studies interviewed by the Investigative Team corroborated the allegation, and we found no other evidentiary support for it.

happens all the time.” The student told the Investigative Team that he never went back for further assessments after that point, despite Strauss’ continued pressure and offers of financial compensation for the student’s participation.

External Physician Input. In reviewing the details of this student’s account, the External Physicians agreed that Strauss’ measurement of the student’s testicles to detect “testicular shrinkage” was likely appropriate given the context of the steroid study. However, the External Physicians indicated that Strauss’ manipulation of the student’s penis to the point of erection was a medically unnecessary and inappropriate practice.

- Another student-athlete who was involved in a Strauss steroid study recalled being well-compensated for his participation. The student-athlete told the Investigative Team that he saw Strauss every week for an estimated five to 10 weeks for exams, which occurred “after hours.” The student stated that, during the exams, Strauss would grab the student’s penis, “move it out of the way,” and use a caliper to measure the testicles. The student recalled that he prevented Strauss from doing anything more than grabbing his penis and measuring his testicles by speaking out when the student felt that Strauss had gone “too far.” The student recalled an incident when Strauss tried to start a conversation while holding the student’s penis, and the student responded, “Is this going to take long?” to try and move things along.

External Physician Input. The External Physicians noted that measuring the testicles with a caliper would not have required “grab[bing]” and “hold[ing]” of the student’s penis for any extended length of time, as was described by this student.

- Another student-athlete who participated in the study recalled that Strauss regularly measured the length of the student-athlete’s testicles, and that the exams were often conducted at Strauss’ home. According to the student-athlete, on multiple occasions, the student was alone in Strauss’ bedroom “stark naked” while Strauss measured his testicles.

External Physician Input. The External Physicians confirmed that Strauss’ practice of conducting these exams at his home was not an acceptable practice. They also indicated that this type of examination would not require a participant to be fully undressed—i.e., this student-athlete should have been allowed to keep his shirt on or have been provided with a medical gown.

- Another study participant, who was not formally associated with OSU as a student or otherwise, saw a local newspaper advertisement seeking “steroid users and non-users” at some time in the mid-1980s. Although the participant only attended one session with Strauss, he recalled that Strauss explained to him that the study was focused on how artificial hormones affect the body and therefore the study involved measurement of the entire body, including the genitals. The participant remembered that the exam took place in a “medical facility” and recalled being entirely naked while Strauss took measurements of his entire body, including forearms, legs, bone density and testes. Strauss took an

estimated total of four to five minutes to measure the participant's testicles. Strauss also ran his thumb along the surface of the scrotum to test for hard spots or problem areas. Strauss did not examine the participant's penis.

External Physician Input. The External Physicians explained that taking measurements of testicles should take one to two minutes in total, not four to five minutes. The External Physicians also noted that conducting a testicular examination as part of this study (i.e., checking for hard spots) could have been appropriate, but that it was not appropriate for Strauss to require the study participant to remain entirely naked throughout this examination. The External Physicians indicated that taking measurements of the forearms, legs, bone density, and testes was likely, in and of itself, appropriate given the context of the study.

a. Publications on the Physical Effects of Steroid Use

Strauss authored numerous articles on the topic of steroids. We reviewed 18 papers, "Editor's Notes," books, and book excerpts by Strauss on the topic, but only two of them appeared to be potentially related to the steroid studies described by the participants interviewed by the Investigative Team, based on the time period of the studies, the descriptions of the research subjects, and the testing that was involved.¹³⁸

The first publication, *Anabolic Steroid Use and Health Status Among Forty-Two Weight-Trained Male Athletes*, was published in the February 1982 edition of *Medicine & Science in Sports & Exercise*, and was authored by Strauss, James E. Wright, and Gerald A.M. Finerman. The one-paragraph publication summarized a study of 30 body builders and five power lifters (some of whom had used steroids) and seven men who trained for health and fitness (none of whom had used steroids). The researchers obtained medical history from the participants and conducted physical examinations, urinalysis, blood testing, and testing for testicular atrophy on the participants. The summary did not indicate where or how the participants were recruited.

The second publication, *Side Effects of Anabolic Steroids in Weight-Trained Men*, was published in the December 1983 edition of *The Physician and Sportsmedicine*, and was authored by Strauss, James E. Wright, Gerald A.M. Finerman, and Don H. Catlin.¹³⁹ The paper documented the patterns of use of anabolic steroids by 32 bodybuilders and seven control athletes (who had never used steroids). A physician recorded the subjects' medical history, performed physical examinations, drew blood, and took a urine sample. It is unclear whether the testicles were measured as a part of this study. The participants were not paid for their time in the study but were given a free health evaluation.

¹³⁸ Although Strauss conducted some studies involving steroid use by women, we were not contacted by any female participants in Strauss' medical studies.

¹³⁹ *Anabolic Steroid Use and Health Status Among Forty-Two Weight-Trained Male Athletes* and *Side Effects of Anabolic Steroids in Weight-Trained Men* may in fact be the same study. While Strauss' co-author could not recall the specifics of the papers and whether the papers discussed the same study, the co-author stated it would not have been unusual for an abstract of the study to be published first, and then followed by a complete paper.

We were able to interview one of Strauss' co-authors from the second study. The co-author recalled only that Strauss was the lead in implementing the study and that the study participants were located in California.

Although these publications align with the time frame given by the witness-participants summarized above, there are inconsistent—or unknown—details concerning whether the participants in the published studies were paid, where they were located, and whether they had caliper measurements performed on them. Consequently, we cannot conclusively determine whether the results of the tests that Strauss performed on the four participants interviewed by the Investigative Team were the results reflected in these two publications.

b. Evidence of Approvals or Other Documentation

Strauss' second publication—*Side Effects of Anabolic Steroids in Weight-Trained Men*—indicated that each participant gave signed informed consent prior to partaking in the study. However, we were unable to locate any consent forms, other research materials, or evidence of approvals from OSU's Human Subject Review Committees or the Research Foundation (OSU's internal body that managed external funding for projects) for a project of this nature involving Strauss. We also did not identify any contemporaneous documentary evidence of complaints about Strauss from participants in his steroid studies.

2. Strauss' Studies on the Effect of Heart Medication on Muscle Performance

We received one account from an OSU student ("Student L") who told the Investigative Team that he participated in a study conducted by Strauss in 1985 in which Strauss was purportedly examining the effect of heart medication on participants' muscle performance during physical activity. During the exam, Strauss fondled Student L's testicles for at least three minutes, at which point Student L told Strauss, "I think that's enough." Strauss then stopped the exam. Student L recalled that the manner of Strauss' examination of his testicles "wasn't clinical" and that he had the impression at the time that Strauss "was getting some kind of enjoyment" out of touching Student L's genitals. Student L, who was employed at Larkins Hall at the time, recalled that there were other study participants present in the room when he was examined by Strauss for the study, but that Strauss took him behind a privacy screen to conduct the physical exam.

External Physician Input. The External Physicians stated that "fondling" of the student's testicles for three minutes was inappropriate and not medically necessary.

Student L told us that he did not report his exam with Strauss to any University personnel. Student L did recall, however, that when the graduate student who was leading the study ("Graduate Student A") recruited Student L and several other Larkins student-employees to participate in the study, he was "apologetic" when explaining that Strauss would be performing the physical exam required for the study. Student L recalled that Graduate Student A indicated that Strauss was serving in some kind of academic advisor role to him and therefore Graduate Student A felt he could not turn down Strauss' offer to conduct the medical exams.

We were also contacted by another Larkins student-employee (“Student M”) who participated in the same study alongside Student L.¹⁴⁰ Student M recalled participating in the study with Student L, and similarly thought (or had assumed) that Strauss was Graduate Student A’s advisor, although Student M did not recall Strauss having any role in the study whatsoever, and Student M also did not recall that a physical was performed on him as part of the study. We note, however, that Graduate Student A’s published thesis indicated that “[e]ach subject received a medical exam by a physician prior to participating” in the study, and thus it is likely Student M has simply forgotten about the physical exam, given that he did not report anything inappropriate happening to him (including a hernia exam) in connection with his participation in the study.¹⁴¹

In his interview with the Investigative Team, Graduate Student A told us that Strauss was not involved in the heart medication study he conducted. Graduate Student A also informed us that Strauss was not his academic advisor.¹⁴² However, unrelated to any medical studies involving Strauss, Graduate Student A told us that he spent a fair amount of time at Larkins Hall due to the fact that the exercise physiology office was located there, and Graduate Student A recalled hearing student-athletes in Larkins “joke” about Strauss’ exams, including jokes that Strauss would require them to “drop their pants” for “non-medical reasons.” Graduate Student A stated that he assumed, at the time, that the comments were just jokes related to Strauss’ rumored or perceived homosexuality. According to Graduate Student A, no student-athlete ever reported specific instances of Strauss’ misconduct to him.

We conducted a follow-up interview with Student L to discuss Graduate Student A’s differing recollection about the study. Student L maintained that he was absolutely certain that Strauss performed the physical exam on him as part of Graduate Student A’s heart medication study, and that he specifically recalled standing in line for the exam with the other participants—including Student M.

a. Publications on the Effect of Heart Medication on Muscle Performance

We were unable to find any published studies by Strauss relating to the effect of heart medication on muscle performance in humans.

b. Evidence of Approvals or Other Documentation

We did not locate any consent forms, other research materials, or evidence of approvals from OSU for a project of this nature involving Strauss. We also did not identify any

¹⁴⁰ We did not reveal Student L’s name to Student M; Student M identified Student L unprompted by the Investigative Team.

¹⁴¹ The thesis did not identify the physicians who performed the medical exams on the study participants, and did not identify Strauss as an advisor (or in any other role).

¹⁴² We confirmed that Strauss was not listed as an advisor or contributor on Graduate Student A’s dissertation or Graduate Student A’s subsequent published article. We also did not locate any articles in which Strauss and Graduate Student A were identified as co-authors.

contemporaneous documentary evidence of complaints about Strauss from participants in a heart medication study.

3. Strauss' Studies on the Muscle Development of Athletes

We received one account from a student-athlete who reported that, between 1982 and 1985, he agreed to participate in a study conducted by Strauss that was purportedly being undertaken to examine muscle development in different types of athletes.

According to the student-athlete, Strauss asked to take pictures of him for "research" related to his study of muscle development among athletes.¹⁴³ The student told the Investigative Team that, although he was uncomfortable with Strauss asking to take his photograph, he agreed to participate because he was concerned that Strauss could affect his status on the team if he declined. The student recalled that Strauss took photos of him on at least two or three occasions. During examinations, Strauss took full body photographs of the partially undressed student (wearing only underwear). Although Strauss took many photographs during these examinations, Strauss never gave the student copies of the photographs.

It is unclear, from an evidentiary perspective, whether Strauss' basis for taking the photographs was pretextual or whether he was legitimately using the photographs for a research study. Regardless, it was clear from our interview with the student-athlete that he did not feel comfortable declining Strauss' solicitation, given that Strauss was his team physician and could affect the student-athlete's status on the team.

a. Publications on Muscle Development

We did not locate any published studies written by Strauss that were consistent with the description of the muscle development study we received from the student-athlete.

b. Evidence of Approvals of Other Documentation

We did not locate any consent forms, other research materials, or evidence of approvals from OSU for a project of this nature involving Strauss. We also did not identify any contemporaneous documentary evidence of complaints about Strauss from participants in a muscle development study.

¹⁴³ The student also told us that he knew of another student-athlete who Strauss photographed during a medical examination, purportedly for a study of muscle development in athletes. He could not recall the name of the other student-athlete and we were not separately contacted by anyone else who reported that Strauss took photographs of them for such a study. We were, however, contacted by another student-athlete who stated that, in the early 1980s, Strauss solicited him to participate in a study on "muscles and the male anatomy," which the student-athlete declined.

4. Strauss' Studies on the Effects of Weight Loss

We received accounts from two student-athletes who told the Investigative Team that they participated in weight loss or body fat studies conducted by Strauss in the early 1980s. Only one of the two student-participants described abusive conduct by Strauss in connection with the studies.

The first student-athlete told us that he participated in a “body fat study” conducted by Strauss sometime in the early 1980s. He recalled that Strauss had him sit in a tub filled with water, while the student-athlete wore shorts. The student-athlete was not paid for the study. The student-athlete did not describe any abusive conduct by Strauss, related to the student’s participation in the “body fat study.”

Another student-athlete, Student K (previously identified above), told us that, in the early 1980s, Strauss approached him to ask if he would participate in a study on the effects of extreme weight loss. At the time, Student K needed to lose approximately 40 pounds, so he agreed to participate in Strauss’ study. Student K was examined by Strauss on an almost daily basis, and the student-athlete recalled that Strauss would conduct a hernia exam each time. Student K also explained that Strauss took photographs of him in his underwear for the study. Student K did not feel there was anything sexual or inappropriate about the photographs, and he recalled that the study was eventually published and that Strauss used the study results (including Student K’s photographs) in lectures and presentations about proper weight loss techniques. Student K thinks he likely signed a consent form to participate in the study, although he could not recall doing so.

External Physician Input. The External Physicians explained that conducting hernia examinations was not medically necessary in the context of the weight loss study described by Student K.

a. Publications Relating to Weight Loss

We located two potentially relevant studies that may align with the weight loss or body fat studies referenced by the student-participants interviewed by the Investigative Team.

First, we located references to a study called “*Effects of Weight Loss on Hormone Levels of Wrestlers*,” in which Strauss and an OSU Department of Medicine professor, William B. Malarkey, were allocated \$5,000 for the study, between 1982 and 1986.¹⁴⁴ The records indicated that Strauss and Malarkey performed a pilot study in approximately 1981 on two wrestlers and sampled the wrestlers’ blood monthly to test whether reproductive or other hormones were adversely affected by the weight loss.¹⁴⁵

¹⁴⁴ Ohio State Univ., Coll. of Med., Annual Reports to the Bremer Foundation (Apr. 1, 1982–May 31, 1986) [CTRL00003317].

¹⁴⁵ See *id.* Additionally, a letter dated October 9, 1981, from the Chairman of Strauss’ faculty department indicated that Strauss was then “currently engaged in the development of an innovative study of growth changes in wrestlers

In the second part of the study, conducted in 1982, Strauss and Malarkey performed monthly testing on 33 members of the OSU varsity wrestling team, which included obtaining blood samples, and measuring blood pressure, weight, and skin folds by calipers at seven sites.¹⁴⁶ Strauss and Malarkey concluded their study in May 1983.¹⁴⁷ This study resulted in the publication entitled, *Weight Loss in Amateur Wrestlers and Its Effect on Serum Testosterone Levels*, by Strauss, Richard R. Lanese, and Malarkey, which was published in the December 1985 issue of the *Journal of the American Medical Association*.¹⁴⁸

Per the paper, 18 college wrestlers and one high school wrestler were studied in January or February (1982), at the peak of their competitive season—when many were at their lowest weight—and in May (1983), two months after the end of the wrestling season—when the wrestlers had returned to their usual, noncompetitive weights. As an indicator of body fat, skin-fold thickness was measured at six sites using calipers. Body weight was measured using a calibrated scale, and blood was drawn to test for testosterone.¹⁴⁹

The other references to potentially relevant weight loss studies are dated in the 1990s. In the December 1993 edition of *The Physician and Sportsmedicine*, Strauss, Lanese, and Malarkey published *Decreased Testosterone and Libido with Severe Weight Loss* (hereinafter “*Decreased Testosterone*”). For the study, the researchers measured a 20-year-old wrestler’s weight, body fat, and hormone levels approximately once each month, starting with the beginning of the wrestling practice season in October. Observations continued through the winter competitive season and in the spring. The purpose of the study was to track how the wrestler’s rapid weight loss affected his testosterone levels over the course of a two-year period. As part of the study, researchers measured skinfold thickness, hormone levels, and other indicators. During the first year of the study, the subject reported the number of sexual episodes (climaxes) he experienced during the preceding seven days as an indicator of the wrestler’s libido.

Neither study indicated the use of a tub to measure body fat, so it seems unlikely that the first student-athlete was a participant in either of these studies. However, as confirmed to the Investigative Team by Student K, even though *Decreased Testosterone* was published almost 10

in relation to drastic dietary and physical activity changes. This will be submitted as a proposal to the NIH this fall.” Letter from Martin D. Keller to Michael Whitcomb (Oct. 9, 1981) [CTRL00000265].

¹⁴⁶ See Ohio State Univ., Coll. of Med., 28th Annual Report to the Bremer Foundation (Apr. 1, 1982–Mar. 31, 1984) [CTRL00003317]. Note that a later report states that 19 members of the OSU varsity wrestling team were tested. See Ohio State Univ., Coll. of Med., 29th Annual Report to the Bremer Foundation (Apr. 1, 1983–Mar. 31, 1984) [CTRL00003317].

¹⁴⁷ Ohio State Univ., Coll. of Med., 29th Annual Report to the Bremer Foundation (Apr. 1, 1983–Mar. 31, 1984) [CTRL00003317].

¹⁴⁸ Richard H. Strauss et al., *Weight Loss in Amateur Wrestlers and Its Effect on Serum Testosterone Levels*, 254 JAMA 3281, 3337–38 (1985) [CTRL00003317].

¹⁴⁹ Per the paper, all research participants were interviewed in private regarding their use of anabolic steroids, so that the data for anyone with a history of such use could be excluded from the analysis. None of the subjects included in the study admitted to using anabolic steroids.

years after Student K's participation in the study with Strauss, the photographs that appear in the publication are of Student K.

We were unable to obtain additional clarification or information about these studies because Strauss' only living co-author—Malarkey—declined to participate in an interview with the Investigative Team.

b. Evidence of Approvals or Other Documentation

We did not locate any consent forms, other research materials, or evidence of approvals from OSU for a project of this nature involving Strauss. We also did not identify any contemporaneous documentary evidence of complaints about Strauss from participants in a weight loss study.

5. Summary of OSU Approval Process for Studies Involving Human Subjects

We undertook efforts to understand the University's internal approval process for research involving human subjects, during the relevant time frame of the Independent Investigation. We conducted an extensive review of archived University documents and interviews with 11 OSU employees regarding related University policies and procedures, including six former members and chairs of the Human Subject Review Committees, two former employees from the Research Foundation, and three individuals who worked at the Research Foundation and also served on the Human Subjects Review Committees. Notably, none of those individuals recalled any proposals by Strauss on the research topics discussed herein. The Investigative Team also reviewed documents from the Human Subject Review Committees and the Research Foundation.

During the relevant period, researchers at OSU seeking to perform studies involving human subjects were required to obtain approval from one of two institutional review boards ("IRBs") called "Human Subject Review Committees."¹⁵⁰ These Committees were responsible for reviewing and monitoring studies to verify that researchers obtained satisfactory informed consent from participants and that the risks to participants were minimized to the extent possible.¹⁵¹ The University also developed and promulgated a formal set of policies for its researchers to follow. These policies were set forth in the University's Program Review for Research, Development, and Related Activities Involving Human Subjects ("Program Review"). The Investigative Team identified copies of the Program Review as revised in 1979, 1981, 1984, and 1988.

Although the Research Committee of the Graduate Council was responsible for the "[d]evelopment and promulgation of policy related to research, development, and related activities in which human subjects are involved," the Ohio State University Research Foundation

¹⁵⁰ See Letter from Katherine Duncan to Kenneth W. Sloan (Feb. 13, 1984) [CTRL_HC_00001869].

¹⁵¹ See *id.*

(the “Research Foundation”) acted as a clearinghouse for research activities and funding at the University and served as the point of contact with the federal government (namely, the Department of Health and Human Services) to obtain and renew formal approvals for the University’s two IRBs. Once researchers at OSU obtained approval from a Human Subject Review Committee, they were required to coordinate any requests for external funding through the Research Foundation.¹⁵²

F. Strauss’ Interactions with High School and Grade School Students

The Investigative Team received one firsthand account of abuse from an OSU student-athlete (“Student N”) who explained that Strauss first sexually abused him when Student N was 14 years old (prior to Student N’s later enrollment at OSU). Student N indicated that the sexual abuse took place in the context of a body fat testing study that Strauss administered at Student N’s Columbus-area high school.

Student N also alleged that Strauss engaged in sexual abuse of other minor children at a summer wrestling camp at OSU, as well as at a private wrestling program (unaffiliated with OSU) (“Private Wrestling Program”); however, Student N did not allege that he personally witnessed any sexual abuse of minor children at a summer wrestling camp at OSU or at the Private Wrestling Program. We received no firsthand accounts of abuse from participants in OSU summer sports camps or the Private Wrestling Program, and located no other evidence that Strauss sexually abused participants in those programs. We did not find conclusive evidence establishing Strauss’ involvement in OSU summer sports camps, and located virtually no evidence of Strauss’ involvement in the Private Wrestling Program (apart from the secondhand allegation reported by Student N).

We incorporated Student N’s firsthand account and secondhand allegations regarding Strauss’ abuse of minors into our investigative workplan and undertook extensive efforts to identify evidence of Strauss’ involvement in programs at OSU through which he may have had access to, or contact with, high school or grade school-aged children. Additionally, we conducted outreach to a number of organizations external to OSU to the extent that the allegations we received involved organizations outside of the University.

As set forth below, we reviewed six primary areas of potential interaction between Strauss and minors. We investigated Strauss’ involvement (or potential involvement) with: (i) body fat testing of male high school and middle school athletes in the Columbus area; (ii) summer sports camps at OSU; (iii) high school state wrestling tournaments; (iv) the Private Wrestling Program for sixth through ninth graders that was identified by Student N; (v) other research studies conducted by Strauss and others, involving minors as research subjects; and

¹⁵²Ohio State Univ., Program Review for Research, Development, and Related Activities Involving Human Subjects pt. II § 3.1 (May 5, 1984) [CTRL_HC_00001876]. The Research Committee of the Graduate Council was a committee of the University’s Graduate Council. The Graduate Council was at one time within Academic Affairs under the Office of the Provost and later was within the Office of Research and Graduate Studies.

(vi) an OSU-hosted program involving minors called the “National Youth Sports Program” which was identified to us by an Investigation witness (without any related allegations of abuse).

1. Body Fat Testing of High School Students

a. Student N’s Firsthand Account of Abuse

As noted above, Student N reported to the Investigative Team that Strauss sexually abused him and other male students at Student N’s Catholic high school located in Columbus (“High School A”) under the guise of their participation in a body fat testing study conducted by Strauss. Specifically, Student N alleged that in 1982 or 1983, when he was 14 years old, one of his high school wrestling coaches informed him and his teammates that Strauss—a medical researcher from OSU who “focused on wrestling”—wanted to perform a “body fat exam” of high school wrestlers to determine how the wrestlers’ weight changed throughout the season. Subsequently, Student N was examined on multiple occasions by Strauss. According to Student N, Strauss fondled Student N’s testicles and penis during the examinations, and—on one occasion—may have digitally penetrated Student N’s rectum.

Moreover, Student N alleged that Strauss would spend two to three hours at a time in High School A’s locker room, watching the male students. Student N also alleged that, as part of the study, he and some of his teammates went to OSU where they underwent nude body fat testing involving some type of “machine.”¹⁵³

b. Outreach to Diocese of Columbus

In June 2018, the Investigative Team contacted the Diocese of Columbus (“the Diocese”) to inform the Diocese of the allegations made by Student N and to request that the Diocese share any information concerning Strauss’ activities at High School A.

On December 12, 2018, a representative from the Diocese informed the Investigative Team that it had conducted its own investigation into allegations of misconduct by Strauss involving student wrestlers at High School A.¹⁵⁴ According to the representative, officials in the Safe Environment Office and School Office of the Diocese reviewed school records and prepared a list of student wrestlers at the four Catholic high schools which had wrestling programs during the period of time that Strauss was in Columbus. Officials from the Diocese then attempted to contact all the students on the list (for whom contact information was available), in addition to coaches from two of the schools.¹⁵⁵

¹⁵³ We believe this is likely a reference to hydrostatic underwater weighing, a process used to determine body composition.

¹⁵⁴ The Diocese did not share its investigative methodology with the Investigative Team or solicit our input with respect to its investigation.

¹⁵⁵ Student N informed the Investigative Team that he was not contacted by the Diocese in connection with its investigation.

According to the Diocese's representative, respondents informed the Diocese that Strauss performed body fat tests at one school, High School A, in 1981 and 1982. The tests primarily took place at High School A and involved the use of skin calipers. However, in some cases, the testing involved underwater body submersion and caliper testing at OSU. Students were asked to undress to be weighed in, but—according to the Diocese—no respondents indicated that they were asked to undress for the caliper testing or body submersion. As conveyed to the Investigative Team, the tests were always conducted in the presence of a wrestling coach from High School A. The Diocese indicated that it did not have any information explaining how High School A got involved in Strauss' study, or what approvals were necessary for the school's participation in it. The Diocese further stated that the respondents did not identify any other researchers who were involved with the body fat testing, but one respondent recalled two unnamed assistants who worked with Strauss.

Finally, the Diocese informed the Investigative Team that it did not receive any "claims of misconduct" by Strauss but noted that "one student replied that Dr. Strauss showered with the students and stared at the students while showering." The Diocese indicated that the respondent alleged that the showering occurred both at High School A and at OSU, with no indication from the respondent that any coaches were present during the showering incidents.

After receiving this report from the Diocese, the Investigative Team asked if the Diocese would be willing to contact the respondents who reported their involvement in the body fat testing at High School A, including the respondent who reported that Strauss showered with him and others, to determine whether they would speak directly with our team about their experience. On January 16, 2019, the Diocese responded via email that it had "completed [its] investigation as initially requested and [did] not intend to take any further action." The Diocese concluded by wishing the Investigative Team success in completing our work; we did not receive any further communications from the Diocese following its response.

As stated above, the only account the Investigative Team received from a student-participant in Strauss' study at High School A was from Student N. Because Student N informed the Investigative Team that he had not been contacted by the Diocese regarding its investigation, it is possible there is another individual who provided a firsthand account—to the Diocese—of misconduct by Strauss, reporting that Strauss showered with the high school-aged students at High School A. Given that we received no additional information from the Diocese, we were unable to reach any final conclusions in this regard.

c. Interviews with Witnesses from High School A

The Investigative Team identified seven potential staff witnesses affiliated with High School A who may have been involved with, or aware of, Strauss' activities in the body fat testing. Of the seven individuals identified, two were unresponsive to our contact attempts, one could not be located, and one was deceased. Of the three witnesses remaining, two had very limited memories of the study and did not recall Strauss' involvement. However, both witnesses

told the Investigative Team that no complaints regarding the study were ever brought to their attention.

The final witness, a former wrestling coach at High School A, was both cooperative and familiar with Strauss' study. According to the coach, the study was conducted between 1981 and 1983 and involved approximately 20 to 25 wrestlers. The coach explained that the study's focus was on determining the optimal weight and weight management for high school wrestlers. As part of the study, Strauss performed skin caliper body fat testing and physical examinations of the wrestlers at High School A. The wrestling coach indicated that he—or an assistant coach—was present “almost 100% of the time” for these tests and physical examinations. According to the coach, Strauss’ physicals, which included a hernia check, appeared to be routine and normal (*i.e.*, a “turn your head and cough” check). The coach denied that Strauss performed genital exams beyond the hernia check on the student participants.

The coach also stated that Strauss “occasionally” performed underwater weigh-ins as part of his study, and that Strauss “may” have been alone with wrestlers while conducting those underwater tests because “only one wrestler could use the machine at a time.” Finally, the coach noted that none of his wrestlers ever indicated to him that they did not want to see Strauss or that Strauss had done anything inappropriate in his examinations. According to the coach, the wrestlers wanted to be part of the study so that they could determine their optimal weight.

d. Other Evidence Relating to Study at High School A

We have been unable to locate any published report relating to Strauss’ research involving High School A. Furthermore, we conducted extensive searches in University records for documents or approvals relating to Strauss’ study at High School A but did not locate anything.

Additionally, the Investigative Team was contacted by a witness who, as a graduate student at OSU, recalled assisting Strauss in the early 1980s with a multi-year research project to study maturation of male high school wrestlers. This research involved taking height, weight, and body composition measurements of high school-age wrestlers at two to three high schools in the Columbus area (the witness could not recall the names of the high schools involved in the study). The graduate assistant further explained that the study involved Strauss conducting “Tanner scale” (or “Tanner stage”)¹⁵⁶ assessments, which typically would entail examinations of the research subjects’ pubic hair length and testicular volume. According to the graduate assistant, Strauss conducted the Tanner scale assessments one-on-one with the research

¹⁵⁶ See, e.g., Mickey Emmanuel & Brooke R. Bokor, *Tanner Stages*, STATPEARLS (2019), available at <https://www.ncbi.nlm.nih.gov/books/NBK470280/> (last visited May 14, 2019) (“Tanner Staging, also known as Sexual Maturity Rating (SMR), is an objective classification system that providers use to document and track the development and sequence of secondary sex characteristics of children during puberty.”).

subjects.¹⁵⁷ However, the graduate assistant also told the Investigative Team that he never heard any complaints about Strauss in connection with the research study (or otherwise).

We cannot determine with certainty whether the research study referenced by the graduate assistant is the same study that was conducted in High School A, given that the graduate assistant could not recall the names of the participating high schools and given that the former wrestling coach at High School A reported that Strauss did not perform genital examinations of the nature described by the graduate assistant. We were also unable to identify a published study by Strauss that aligns with the description provided by the graduate assistant we interviewed.

e. Other Outreach Efforts Relating to Body Fat Testing

The Investigative Team also received one secondhand allegation that Strauss conducted body fat testing at a Columbus area middle school (“Middle School A”). The witness stated that his brother had been tested by Strauss at Middle School A as part of a body fat testing study. The witness did not allege that Strauss sexually abused students at Middle School A, and the Investigative Team was not contacted by anyone alleging that Strauss abused them in connection with body fat testing performed at Middle School A, or any other middle school.¹⁵⁸

Nevertheless, we contacted the school district for Middle School A and spoke with the district’s Director of Communications, as well as an attorney for the district. The Director of Communications coordinated an effort by the school district to determine if Strauss had performed any studies at Middle School A. The Director of Communications identified three individuals who worked at Middle School A during the relevant period and contacted them regarding whether they knew about any body fat or maturation studies conducted at Middle School A. We were told that none of these individuals was aware of such studies. The Director of Communications also reported that she looked through the school district’s archived materials and did not find any information concerning such studies, including complaints or mentions of Strauss during the relevant time period.

2. Summer Sports Camps at OSU

Student N provided a secondhand report to the Investigative Team alleging that Strauss sexually abused an 11-year-old attendee of an OSU summer wrestling camp (“Minor A”), on an unspecified date. Student N alleged that Strauss abused Minor A in the context of conducting a genital examination at the “Jesse Owens facility” at OSU. We also received one thirdhand account regarding the alleged abuse of Minor A from another OSU student-athlete (“Student O”)

¹⁵⁷ The witness did not know whether this research project had been reviewed by one of OSU’s Human Subjects Review Boards. Although he believes participant consent forms were obtained, the witness was not sure if that was correct. The Investigative Team did not locate evidence to confirm whether this research project was reviewed by a Human Subjects Review Board, or whether and what type of consent was obtained from the participants.

¹⁵⁸ We invited the witness to have his brother contact the Investigative Team regarding the brother’s interactions with Strauss. We received no contact from the witness’s brother.

who indicated that he did not speak with Minor A directly about the alleged abuse but heard about it from an unidentified third person.

Both Student N and Student O indicated that they worked at OSU summer wrestling camps during the late 1980s and early 1990s; however, they did not allege that they personally witnessed the abuse of Minor A. The Investigative Team was never contacted by Minor A—or by any other individuals who reported that they were sexually abused by Strauss in connection with an OSU summer wrestling camp.¹⁵⁹

The Investigative Team interviewed over 40 witnesses and conducted searches within the University Archives to determine whether Strauss was involved with summer sports camps at OSU. Our investigative efforts yielded mixed results, as summarized below.

We did not identify any records or other documentary evidence of Strauss' involvement with summer sports camps at OSU. We interviewed 19 individuals who were involved in OSU summer wrestling camps during the relevant time period, including members of the OSU coaching staff and student-athletes. Twelve individuals had no recollection of Strauss' involvement with the camps. However, three student-athletes who worked at the wrestling camps recalled witnessing Strauss provide medical care to camp participants as needed. An additional four student-athletes believed that Strauss was involved in the summer wrestling camps, although they could not provide any clear recollection of his presence there. In addition, we interviewed one student-athlete who believed that Strauss may have been involved with summer tennis camps at OSU. No other individuals interviewed by the Investigative Team reported that Strauss was involved in sports camps for minors at OSU.

Ultimately, we cannot conclusively determine what, if any, involvement—formal or informal—Strauss had with summer sports camps at OSU, and what years he may have been involved. However, as noted above, we received no firsthand accounts of abuse from any individual alleging sexual abuse by Strauss at an OSU summer sports camp, and we did not locate any documentary evidence of any such abuse.

3. High School Wrestling Tournaments

Although we did not receive any related firsthand or secondhand accounts of abuse, the Investigative Team confirmed that Strauss was involved as a physician at Ohio state high school wrestling tournaments during the relevant time period. In that capacity, Strauss would have helped perform skin checks on participants and been present for weigh-ins. We did not identify any documentary evidence that Strauss abused—or was accused of abusing—minors in the context of the state high school wrestling tournaments.

¹⁵⁹ Student N indicated to us that he was in regular communication with Minor A. We requested that Student N ask Minor A to contact us directly about his interactions with Strauss, including on a strictly anonymous basis.

We conducted outreach to the Ohio High School Athletic Association (“OHSAA”) to request information evidencing Strauss’ involvement in high school wrestling tournaments. OHSAA provided us with records confirming that Strauss volunteered or served as a physician at state wrestling tournaments held in (at least) 1980–1983, 1985–1987, and 1989–1997. Three officials from OHSAA indicated that Strauss would have performed skin checks and been present at the tournaments’ weigh-ins. Of those officials, one recalled that Strauss was primarily used as a physician at the weigh-ins and on the tournament floor. As explained by OHSAA officials, prior to the start of high school wrestling tournaments, all wrestlers needed to be weighed-in and to have their skin checked to ensure that they did not have any communicable skin issues or diseases. The skin checks occurred in large group settings and without privacy curtains that would have enabled any isolated one-on-one physician interactions with the wrestlers.

Eight individuals who were employed at OSU during Strauss’ time at the University reported to the Investigative Team that they were aware that Strauss served as a physician at the tournaments. One athletic trainer indicated that he heard jokes from other athletic training staff that the high school wrestling tournaments were like a “Doc Strauss holiday” with a “parade of boys.” We asked other witnesses who were members of the OSU athletic training staff during Strauss’ employment at the University if they remembered the jokes referenced above. No one indicated that they did, although two trainers conceded it was consistent with the type of jokes that would be made about Strauss.

a. Historical Tournament Rules Governing Weigh-Ins

According to one OHSAA official, who had been involved with OHSAA state wrestling tournaments since the early 1980s, weigh-ins were conducted in accordance with the rules promulgated by the National Federation of State High School Associations (“NFHS”). We contacted NFHS to determine the rules governing weigh-ins and skin checks during Strauss’ involvement with high school wrestling tournaments. NFHS provided the Investigative Team with samples of the applicable historical rules, which have been amended over time and reflect general changes to wrestling norms. For example: the 1981–1982 rules required all wrestlers to weigh-in while naked; the 1990–1991 rules required all wrestlers to weigh-in while wearing no more than an athletic supporter; the 1996–1997 rules required all wrestlers to weigh-in while wearing no more than a suitable undergarment; and the 2018–2019 rules require all wrestlers to weigh-in while wearing a suitable undergarment that completely covers the buttocks and groin areas.

The Investigative Team did not receive any reports that Strauss’ conduct during the skin checks or at the weigh-ins was inconsistent with NFHS rules, or that Strauss was ever alone with the wrestlers during tournament skin checks or weigh-ins. Similarly, we received no allegations that Strauss physically touched any of the high school wrestlers during tournament skin checks or weigh-ins.

b. Strauss' Publications Referencing High School Tournaments

The Independent Investigation found that Strauss wrote at least two research articles based on his experience at high school wrestling tournaments.

(i) 1982 Paper Regarding Injuries in High School Wrestlers

In 1982, Strauss and Richard R. Lanese, a former professor in OSU's Department of Preventive Medicine, published a paper titled *Injuries Among Wrestlers in School and College Tournaments* in the *Journal of the American Medical Association*.¹⁶⁰ The paper sought to "compare the incidence and types of injuries sustained by wrestlers of different ages and skill levels" at wrestling tournaments, and confirms that Strauss was present at the 1981 "High School State Championships of Ohio."¹⁶¹ The paper also indicates Strauss was present at the "Kids State Championship" in Columbus.¹⁶²

According to the paper, Strauss collected data and was "present at every tournament and acted either as an attending physician or as a physician-observer for most injuries."¹⁶³ The paper indicated that "[a]n athletic trainer or student trainer was usually present" at the mat, and that after a match, "the trainer assisted an injured wrestler to the training room" for examination by a physician.¹⁶⁴ The paper reported that 11 wrestlers were injured at the Kids State Championship and 58 wrestlers were injured at the High School State Championship.¹⁶⁵

(ii) 1983 Paper Using Data from High School Tournament

In 1983, Strauss and Timothy Jon Curry, who was then an associate professor of sociology at OSU, co-authored a paper titled *Social Factors in Wrestlers' Health Problems* that was published in *The Physician and Sportsmedicine*.¹⁶⁶ The paper used the same data collected by Strauss at the 1981 Ohio High School Wrestling Championships and discussed the social factors that produced injury and illness in wrestlers, how to prevent these problems, and how to minimize subsequent damage. The paper also included photographs of wrestlers that may have been taken at the high school wrestling tournaments, as well as statements made by wrestlers during the tournaments.

¹⁶⁰ Richard H. Strauss & Richard R. Lanese, *Injuries Among Wrestlers in School and College Tournaments*, 248 JAMA 2016 (1982). Lanese passed away in 2012 and thus could not be interviewed for the Investigation.

¹⁶¹ *Id.*

¹⁶² Per the paper, the Kids State Championship had 291 nine- to 14-year-old wrestlers competing in it. *Id.* at 2017. The High School State Championship had 520 high school wrestler competitors. *Id.* We did not receive any allegations that Strauss engaged in misconduct regarding the Kids State Championship. In addition, our investigative efforts to locate information concerning the "Kids State Championship," including its organizing body and contact information, resulted in no data.

¹⁶³ *Id.* at 2016.

¹⁶⁴ *Id.* at 2017.

¹⁶⁵ *Id.*

¹⁶⁶ Richard H. Strauss & Timothy Jon Curry, *Social Factors in Wrestlers' Health Problems*, 11 PHYSICIAN & SPORTSMEDICINE 86 (1983).

Strauss' co-author, Curry, participated in an interview with the Investigative Team and reported that he did not witness Strauss perform any medical examinations as part of the research for the article. According to Curry, Strauss was the senior author on the article and had primary responsibility for its content. Curry indicated that both Strauss and Curry contributed the photographs published in the article,¹⁶⁷ and Curry provided some of the sociology and interpretation used in the article. Curry was unsure whether Strauss obtained research approval from OSU's Human Subject Review Board in connection with the paper, but noted that such approval may not have been necessary as the study used aggregated data from OHSAA and did not involve gathering data directly from the wrestlers.

4. Private Wrestling Program (non-OSU)

Student N also provided a secondhand report to the Investigative Team alleging that—during Strauss' time at OSU—Strauss sexually abused boys between the ages of 11 and 14 in the context of their participation in a local Private Wrestling Program, unaffiliated with the University. Student N indicated that he did not have firsthand knowledge of the alleged abuse; rather, he identified another individual who purportedly was abused by Strauss ("Minor B").¹⁶⁸ Because Student N indicated to us that he was in regular communication with Minor B, we requested that Student N ask Minor B to contact us directly about his interactions with Strauss, including on a strictly anonymous basis. Consistent with our trauma-informed approach, we did not attempt to directly contact Minor B. The Investigative Team was never contacted by Minor B, and we received no firsthand (or secondhand) account of abuse from anyone else relating to Strauss' alleged involvement in the Private Wrestling Program.

Separately, we sought to determine whether Strauss was involved in the Private Wrestling Program. We interviewed three OSU student-athletes who participated in the Private Wrestling Program during the relevant time frame, but none of them recalled any involvement in the Program by Strauss. We also interviewed the individual who founded the Private Wrestling Program, and he reported that Strauss was not involved with the Program. We also note that we identified no reference to Strauss' involvement in the Private Wrestling Program in Strauss' personal papers, including his curriculum vitae.

5. Other Research Studies Involving Minors

In light of Student N's reports of abuse by Strauss during the body fat testing conducted at High School A, we sought to determine whether there are any additional studies published by Strauss involving minors. Accordingly, we identified five published studies by Strauss that

¹⁶⁷ Both Strauss and Curry are credited in the article for having provided the photographs contained therein.

¹⁶⁸ Student N also alleged that another adult male involved with the Private Wrestling Program had engaged in the sexual abuse of minors, along with Strauss. Given that this allegation was outside the purview of the Independent Investigation (and included recent allegations of abuse), we referred Student N's allegations to the Franklin County Prosecutor's Office.

involved minors, as outlined below. We did not receive any allegations of abuse from individuals identifying themselves as participants in these studies.

- **Richard H. Strauss & Richard R. Lanese, *Injuries Among Wrestlers in School and College Tournaments*, 248 JAMA 2016 (1982).** This study was discussed above. Other than the published study itself, the Investigative Team was unable to uncover any other documentation regarding this study, and the only co-author is, as noted, deceased.
- **Richard H. Strauss et al., Letter to the Editor, *Creatine Kinase MB Isoenzyme Among Competitive Swimmers*, 306 NEW ENGLAND J. MED. 1180 (1982).** In this study, blood samples were collected weekly from 14 members of a men's collegiate swim team during their competitive season as well as from 38 high school boys and girls who were in training at a camp for competitive swimmers. The only living co-author of this article had no recollection of collaborating with Strauss on this study and stated he had never participated in any research involving the topic of the study. Other than the published study itself, the Investigative Team was unable to uncover any other documentation regarding this study.
- **Richard H. Strauss & Timothy Jon Curry, *Social Factors in Wrestlers' Health Problems*, 11 PHYSICIAN & SPORTSMEDICINE 86 (1983).** This study was also discussed above. Other than the published study itself, the Investigative Team was unable to uncover any other documentation regarding this study.
- **Richard H. Strauss, Richard R. Lanese, & William B. Malarkey, *Weight Loss in Amateur Wrestlers and its Effect on Serum Testosterone Levels*, 254 JAMA 3337 (1985).** As part of this research, 18 college wrestlers and one high school wrestler were studied. We received allegations of abuse that may have occurred in connection with this study (discussed in Section V.E.), but none of the allegations involved minors. The only living co-author of this article declined to be interviewed for the Independent Investigation.
- **David E. Schuller, Steven D. Dankle, & Richard H. Strauss, *A Technique to Treat Wrestlers' Auricular Hematoma Without Interrupting Training or Competition*, 115 ARCH OTOLARYNGOLOGY—Head & Neck Surgery 202 (1989).** This study involved 19 high school or collegiate wrestlers who underwent treatment for auricular hematomas (also known as “cauliflower ear”). According to the co-authors, Strauss had no involvement with the study, but was included as an author as a “courtesy” because he was the OSU wrestling team doctor and may have referred wrestlers to the researchers to

undergo the procedure.¹⁶⁹ Other than the published study itself, the Investigative Team was unable to uncover any other documentation regarding this study.

6. National Youth Sports Program

One student-athlete informed the Investigative Team that he believed Strauss volunteered with an organization called The National Youth Sports Program (“NYSP”) at OSU, although he did not allege that Strauss sexually abused anyone in connection with NYSP. Nevertheless, the Investigative Team sought to determine whether Strauss was involved in NYSP, as described below.

We learned that NYSP was a community outreach program that provided sports and educational instruction during the summers to low-income, economically disadvantaged youth (ages nine to 17).¹⁷⁰ OSU, as well as colleges and universities across the country, hosted NYSP on its campus. NYSP participants were required to have physical examinations to participate. For some, one of the program’s benefits was the ability to receive a free physical examination, which was performed at OSU by one of its volunteer physicians. Participants could also elect to have their own physicians conduct the examination. Based on documents relating to the scope of NYSP’s required physical examination, it appears that hernia examinations were a component of such physicals.¹⁷¹ However, witnesses involved with the program did not recall whether, in practice, hernia examinations were required or performed.

Through our document searches, the Investigative Team identified and interviewed seven witnesses who were familiar with NYSP’s operations at OSU at various times during Strauss’ employment at OSU. None of these witnesses recalled Strauss being involved with NYSP. Our review of relevant documents did not indicate that Strauss was involved with NYSP. Moreover, we did not identify any allegations of misconduct or abuse against Strauss relating to NYSP.

¹⁶⁹ It appears Strauss may have been involved with gathering some of the research for this study. Specifically, as stated in the article, “two of the auricular hematomas in this series were totally treated in a successful fashion by one of us with no surgical training (R.H.S.).” David E. Schuller, Steven D. Dankle, & Richard H. Strauss, *A Technique to Treat Wrestlers’ Auricular Hematoma Without Interrupting Training or Competition*, 115 ARCH OTOLARYNGOLOGY—Head & Neck Surgery 202, 206 (1989). The initials “R.H.S.” appear to be a reference to Strauss’ initials. Neither of Strauss’ co-authors had a recollection of Strauss performing the procedure, although they did not contest that he may have.

¹⁷⁰ NYSP was the predecessor to OSU’s LiFEsports Initiative. See *LiFEsports: Our History*, Ohio St. Univ., <http://www.osulifesports.org/about/life-sports-history/> (last visited May 14, 2019); *One America: National Youth Sports Program*, White House, available at https://clintonwhitehouse3.archives.gov/Initiatives/OneAmerica/Practices/pp_19980915.3982.html (last visited May 14, 2019) (accessed through version 3 of the archived Clinton White House website, as it existed in July 2000).

¹⁷¹ See, e.g., National Youth Sports Program, Medical Examination Record (1991) [CTRL_HC_00033031]; NAT’L COLLEGIATE ATHLETIC ASS’N ET AL., PLANNING AND OPERATIONS GUIDE FOR THE NATIONAL YOUTH SPORTS PROGRAM at 23 (1978) [CTRL_HC00022366].

G. Strauss' Private "Men's Clinics of America" (Columbus, OH)

Seven students provided firsthand accounts of abuse that occurred at a private, off-campus clinic located at 1350 West 5th Avenue, Columbus, called "Men's Clinics of America" ("MCA"). MCA was owned and operated by Strauss while he was still employed at OSU, although MCA had no affiliation with the University. Five of the seven students who provided accounts of abuse were student-athletes for whom Strauss served as a team physician.

In September 1996, within weeks of Strauss' formal removal as a physician from OSU Student Health Services and Athletics, he began seeing patients at MCA. MCA purported to specialize in treating men for genital-urinary problems.

We interviewed three students who were employed by Strauss to perform work at MCA; one of those employees also provided a personal account of abuse (identified as "Student P" below). Two of the students only worked at MCA very briefly, but the third student worked there beginning in the Fall of 1996 until the Spring of 1997 ("Employee A").

1. Establishment of MCA

By March 1996—shortly after being placed on administrative leave from Student Health and the Athletics Department in late January 1996, and while the Student Affairs Investigation into his conduct was underway—Strauss was exploring the possibility of opening a private, off-campus medical clinic that would specialize in men's genital and urological issues. On April 2, 1996, the Ohio Secretary of State issued a certificate reserving the corporate name "Men's Clinics of America, Inc."¹⁷²

Ultimately, as discussed further in this Report, Student Affairs convened a disciplinary hearing with Strauss in June 1996, and, in early August 1996, Strauss was removed from Student Health and Athletics. MCA was incorporated on August 19, 1996,¹⁷³ and Strauss began treating patients at MCA in early September 1996.

2. Student Accounts of Abuse at MCA

The misconduct described by students treated by Strauss at MCA is consistent with the firsthand accounts of abuse that we received from students examined by Strauss in Student Health and Athletics.

- One patient of MCA, an OSU graduate student, went to see Strauss at MCA after seeing an MCA advertisement for STD screenings in the bathroom of a bar near campus. During the exam, Strauss stroked the student's penis for roughly 15 to 30 seconds; Strauss told the student he was extracting fluid to perform an STD test. After the exam,

¹⁷² State of Ohio, Sec'y of State, Name Reservation Certificate No. NR609912 (Apr. 2, 1996) [RHS_000094-97].

¹⁷³ MCA was subsequently dissolved roughly two years later, on August 27, 1998.

Strauss offered the student a follow-up exam to be conducted free-of-charge at Strauss' home. The student told the Investigative Team that the cost-free exam was a factor in his decision to go to the follow-up appointment at Strauss' home, which took place in a bedroom in Strauss' house.

During the exam at Strauss' house, Strauss "aggressive[ly] stroked" the student's penis to the point that the student felt Strauss was overtly trying to arouse the student (and the student perceived that Strauss was himself sexually aroused); when the student failed to become erect, Strauss asked the student if he could massage the student's prostate to "extract fluid" for "testing." The student felt as though Strauss was attempting to "jerk him off" and ended the session. As the student prepared to leave, Strauss mentioned that he treated "Olympic athletes and wrestlers," possibly as an attempt to assuage the student's concerns regarding the inappropriate touching that had occurred during the exam.

External Physician Input. We consulted the External Physicians regarding this incident. The External Physicians agreed that extracting fluid for an STD screening may have been appropriate if properly administered. But Strauss' methodology for extracting fluid was inappropriate. A physician need not stroke the penis for 15 to 30 seconds to extract fluid from the tip of the penis. Additionally, the External Physicians confirmed that the follow-up test at Strauss' home was inappropriate and constituted a breakdown of the accepted patient/physician boundaries.

- Another student reported that Strauss had been treating him for genital warts at the OSU Student Health Men's Clinic and that Strauss offered to see him at MCA for follow-up treatment. Although the student recalled that the prior treatments he received from Strauss at Student Health had been "on the line" of misconduct, he explained that the appointment he had with Strauss at MCA was more aggressive. At that appointment, the student recalled that Strauss conducted an ungloved exam (as he had at OSU's Student Health Men's Clinic) with his face unusually close to the student's penis. Strauss then rubbed the student's penis to the point of near-ejaculation; when the student requested that Strauss stop, Strauss asked to "let him finish." However, when the student again asked Strauss to stop, Strauss agreed and offered to take the student out for dinner.

External Physician Input. As noted above, the External Physicians indicated that Strauss' close proximity to the student's penis and the rubbing of the student's penis were inappropriate actions. The External Physicians also stated that Strauss' comment ("let [me] finish") was also inappropriate; as a general rule, when a patient asks a physician to stop an examination, procedure, or treatment, the physician should stop. Finally, the External Physicians stated that asking a patient to go to dinner in a one-on-one setting was inappropriate behavior.

- One student ("Student P") who worked at MCA on three or four occasions stated that Strauss sometimes requested that Student P remain in the examination room to observe patient treatments. During one such exam, Student P witnessed Strauss "playing" with a

patient's penis to the point that the patient ejaculated. Student P recalled that the patient looked "petrified" and "in shock." Student P further stated that Strauss later told him that he had been testing the patient for "premature ejaculation."

Student P also stated that he was personally abused by Strauss at MCA, when Strauss fondled Student P's genitals for approximately four to five minutes during a medical exam for "heartburn." Student P stopped working at MCA immediately after this incident.

External Physician Input. The External Physicians stated that "playing" with the patient's penis was inappropriate and not medically necessary. Additionally, the External Physicians explained that a genital examination for a chief complaint of heartburn was "completely inappropriate."

The Investigative Team did not identify any evidence suggesting that complaints of abuse at MCA were reported to any individuals at OSU, although we did obtain evidence that various University officials were aware that Straus was operating MCA. This evidence is discussed further in Section VI.C.

3. Employee Witness Descriptions of MCA Operations

According to witnesses who provided firsthand accounts to the Investigative Team, at least four male OSU students worked at MCA, primarily in administrative or clerical roles. An employee who briefly worked there recalled that Strauss treated members of the public (i.e., non-student patients) as well as OSU students. However, the employee reported that Strauss only directed him to create patient charts for the non-student patients. This employee also believed that Strauss never charged OSU student-athletes for their visits.¹⁷⁴

The employee who worked at MCA for the longest period of time, Employee A, reported to the Investigative Team that the general population of patients who came to MCA were young men—appearing to be college-aged or young professionals. Employee A also recalled that MCA appeared to be essentially operating as a free clinic. He did not recall Strauss regularly charging patients and, if Strauss did charge for his services, payments were kept in a cash lockbox. Employee A recalled that, at least once every shift, Strauss would indicate that he had "one of his athletes" coming in for treatment. Strauss would bring the athlete to the examination room and would not ask Employee A to observe.

Although Employee A never witnessed Strauss engage in sexually abusive conduct with a patient, Employee A stated that Strauss' practices were "odd" and "unsanitary." For example, Strauss did not have disposable medical gloves at MCA. Employee A reported that he brought his own gloves with him to work so that he could wear them when handling specimens for

¹⁷⁴ An OSU student-athlete who visited Strauss at MCA on approximately two occasions also reported that Strauss did not charge him for his visit.

biohazard disposal. He also explained that Strauss would perform procedures on some patients outside of the examination room. In some cases, as witnessed by Employee A, Strauss even performed urethral swabs on patients outside of the examination room, and Strauss would direct Employee A to assist by holding the specimen container and biohazard bag. According to Employee A, Strauss did not wear medical gloves when treating patients, which was particularly unusual at the time, given HIV awareness.

4. MCA Advertisements at OSU and in the Greater Columbus Area

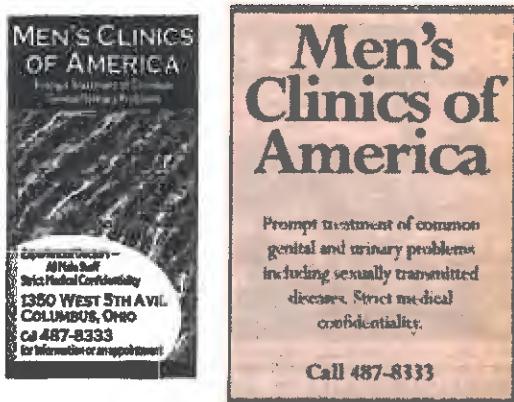
Strauss solicited male OSU students through newspaper advertisements and radio advertisements. Between September 30, 1996, and February 13, 1997, Strauss placed 33 advertisements for MCA in *The Lantern*, in addition to advertisements in an alternative weekly newspaper called *The Other Paper*, a local business news journal called *Columbus Business First*, and a local independent newspaper called *Outlook*.¹⁷⁵ The advertisements did not identify Strauss by name. The advertisements in *The Lantern*, *The Other Paper*, and *Outlook* falsely indicated that there were multiple “[e]xperienced [d]octors” working at MCA, even though Strauss was the only physician on staff. The advertisements in *The Lantern* and in the 1997 issues of *Outlook* also made a prominent offer of a “STUDENT DISCOUNT.”

MCA Advertisements from *The Lantern*:



¹⁷⁵ *The Other Paper* ceased operations in 2013; the Investigative Team was unable to locate archived copies of the paper to conduct an exhaustive search for the advertisements. We performed a search of archived copies of *Columbus Business First* from January 1, 1996, through December 25, 1998, and only located one MCA advertisement in the issue dated August 30, 1996. The MCA advertisement was contained in the main section of the paper and not in the classified/marketplace section. Lastly, we performed a search of archived copies of *Outlook* from January 1, 1996, through December 31, 1998, and located six advertisements for MCA. The first advertisement for MCA appeared in the September 5, 1996, issue of *Outlook*, and the last advertisement appeared in February 6, 1997.

MCA Advertisements from *The Other Paper* (left) and *Business First* (right):



MCA Advertisements from *Outlook*:



As noted above, one student reported to the Investigative Team that MCA advertisements offering STD screenings were also placed in the bathrooms at bars near campus. Additionally, a former employee of MCA reported that Strauss also placed advertisements for MCA on the radio; according to the employee, the radio advertisements emphasized that services could be obtained with complete anonymity.

5. Other Investigative Efforts Concerning MCA

The Investigative Team reviewed property records and contacted the current and prior property managers and owners of the building where MCA was located. We also consulted local address and business directories¹⁷⁶ and reached out to long term tenants whose tenancy

¹⁷⁶ The Investigative Team reviewed local address and business directories from 1995 to 1998 and identified entries MCA in the Ameritech PagesPlus Local White Pages 1996–1997 and the 1997 Haines Criss-Cross Directory for Columbus, Ohio (which indicated it was a new entry). The listing did not appear in the 1998 Haines Criss-Cross Directory or the 1998 White Pages.

overlapped with MCA. Outreach to the previous building owner and property management company generated no new information. Of the six current tenants of the building who were also tenants in 1997, two recalled MCA temporarily sharing the building but otherwise had no memory of Strauss or of seeing any patients who visited MCA.

6. MCA Dissolution

By June 1997, roughly a year had passed since OSU removed Strauss as physician with Student Health and Athletics. At this time, Strauss was making plans to relocate to California and to open another MCA location there. Strauss obtained Name Reservation Certificates from the California Secretary of State reserving two names, the “Men’s Clinics of America” and “Sexually Transmitted Disease - Men’s Clinics.”

By January 1998, Strauss had relocated to California. Later that year, in August 1998, Strauss formally dissolved MCA in Columbus through the Ohio Secretary of State.¹⁷⁷

Although Strauss’ post-OSU activities were outside the scope of the Independent Investigation, our search of public records found that he filed Articles of Incorporation for “Men’s Medical Clinic of America, Inc.” on February 3, 1998, with the California Secretary of State. The entity address listed for Strauss’ California clinic was: 11669 Santa Monica Blvd, Suite 104, Los Angeles, CA 90025. On December 30, 1998, Strauss filed a Certificate of Dissolution, certifying that the corporation was dissolved.

We did not receive any firsthand accounts from individuals alleging they were abused at Strauss’ California clinic at 11669 Santa Monica Blvd.¹⁷⁸ We also did not identify any lawsuits to which either of Strauss’ clinics in Columbus or Los Angeles were named as a party.¹⁷⁹

VI. SUMMARY OF FINDINGS REGARDING UNIVERSITY KNOWLEDGE OF STRAUSS’ SEXUAL ABUSE OF STUDENTS

Our summary of findings in this Section focuses, in particular, on documentary evidence of knowledge regarding Strauss’ sexual misconduct among University personnel, contemporaneous to the time period of Strauss’ employment at OSU (“University knowledge”). We also identify key witness accounts provided to us by University personnel in which they

¹⁷⁷ State of Ohio, Sec’y of State, Certificate of Dissolution by Shareholders No. NR609912 (Aug. 24, 1998) [RHS_000007–08].

¹⁷⁸ As referenced, above, the broad national media coverage of the Independent Investigation included reports in major newspapers in California, including the *Los Angeles Times*.

¹⁷⁹ Our research focused on court records in Franklin County, Ohio, and Los Angeles County, California. We also conducted searches of nationwide court record databases which cover many county-level jurisdictions (in varying timeframes), as well as the federal courts. We did learn, however, that in October 1997, Strauss was served with written notice of a potential legal action against him and MCA “relating to professional services.” No lawsuit was ultimately filed. We spoke with the attorney who sent the notice of potential action to Strauss, but he could not recall whether the legal action related to any allegations of sexual misconduct against Strauss.

acknowledged their varying degrees of awareness of complaints or reports regarding Strauss' sexual abuse or abusive conduct.

Given the high volume of witness accounts we received, we do not provide an exhaustive recounting of every witness statement in this Report. Rather, this Section provides a detailed, comprehensive summary of the most salient or broadly corroborated witness accounts regarding "University knowledge," particularly among individuals who had administrative responsibilities at the University (including in the Department of Athletics, Student Health Services, the Office of Student Affairs, and the College of Medicine/School of Public Health).

A. OSU Department of Athletics

The student-athletes we interviewed described how certain aspects of Strauss' behavior were broadly witnessed and discussed in the Athletics Department, including the fact that Strauss habitually showered with the male student-athletes, and that he frequently performed lengthy or medically unnecessary genital exams on male student-athletes, regardless of what injury or illness was presented to him. Students openly discussed Strauss' examination methods or complained about his loitering presence in the shower and locker room, including in front of coaches and other Athletics Department staff.

Many of the students felt that Strauss' behavior was an "open secret," as it appeared to them that their coaches, trainers, and other team physicians were fully aware of Strauss' activities, and yet few seemed inclined to do anything to stop it. The students we interviewed explained that, at the time, they felt that being examined by Strauss was akin to being "hazed" or was a "rite of passage." Other students indicated that they did not want to stir up any trouble or controversy that could jeopardize their position on the team or, potentially, their scholarship status.

More than 50 individuals who were members of the OSU Athletics Department staff during Strauss' time at the University corroborated these student accounts during interviews with the Investigative Team. The student and staff accounts were further corroborated by various contemporaneous records that we located in the Independent Investigation, as detailed below.

1. Athletics Department Administrators

Over the length of time that Strauss was at OSU, four different individuals served in the role of Athletic Director at the University: Hugh Hindman (1977–May 1984),¹⁸⁰ Rick Bay (May 1984–November 1987), Jim Jones (November 1987–April 1994), and Andy Geiger (April 1994–2005).¹⁸¹ Each of the former Athletic Directors participated in interviews with the Investigative Team, with the exception of Hindman, who passed away in 1994.

¹⁸⁰ Strauss did not begin his employment at OSU until September 1978.

¹⁸¹ Strauss' effective retirement date from OSU was March 1, 1998.

Only one individual interviewed by the Investigative Team—Student N—stated that he reported concerns about Strauss to an OSU Athletic Director.¹⁸² As discussed below, Student N alleged that he raised complaints about Strauss to Jim Jones in or around 1994. Separately, we received reports—and in some instances identified contemporaneous documentary evidence—that students and staff raised concerns about Strauss to other Athletics Department administrators, including Assistant and Associate Athletic Directors, as well as two Head Team Physicians and a Head Athletic Trainer, as described further in this Section.

The Investigative Team identified documentary evidence that, in November 1994, complaints about Strauss were raised by male student-athletes from the fencing team and brought to the attention of the Medical Director of OSU’s Sports Medicine Program/Head Team Physician, Dr. John Lombardo, as well as Senior Associate Athletic Director Paul Krebs.¹⁸³ Although we did not identify evidence that the November 1994 complaint was shared with the Athletic Director—Andy Geiger—at that time, Geiger indicated in his interview with the Investigative Team that, as a matter of course, Krebs likely would have shared the complaint with him (although he had no independent recollection of Krebs—or Lombardo—doing so). However, in 1996, following the complaint against Strauss brought by Student C in Student Health, Geiger was made aware of the Student Affairs Investigation into Strauss’ misconduct. The Student Affairs Investigation—which began in January 1996—and the disciplinary action that followed, are discussed in Section VI.C.

a. Student N’s Allegations regarding Jim Jones and Andy Geiger

Student N alleged that he addressed issues of “sexual abuse and harassment” in his 1990s master’s thesis and presented that thesis to Athletic Director Jim Jones and an Assistant Athletic Director for Student-Athlete Support Services, Kate Riffey. Student N also alleged that he personally spoke with Jones in the early 1990s, on multiple occasions, about “the environment for student athletes and Strauss and [the Larkins Hall locker room].”¹⁸⁴

Further, Student N alleged that his head coach (“Coach A”) “reported multiple cases of sexual assault by” Strauss to two former Athletic Directors, including Jones and Geiger. Another student-athlete (“Student Q”) alleged that Coach A told Student Q that he spoke to Geiger and Assistant Athletic Director Archie Griffin regarding Student Q’s complaints about Strauss performing unnecessary genital examinations for unrelated injuries. We address each of those allegations in turn.

¹⁸² The Investigative Team is aware that the litigants in *Snyder-Hill v. Ohio State University*, allege that the inappropriate nature of Strauss’ “genital examinations” was well known and “a running joke” among trainers, coaches, and administrators, including Athletic Director Hugh Hindman. See Am. Compl., No. 2:18-cv-00736 (S.D. Ohio, filed Nov. 13, 2018), ECF No. 27 (“*Snyder-Hill* FAC”). However, we identified no documentary evidence and received no witness testimony during our Investigation demonstrating Hindman’s knowledge.

¹⁸³ Letter from John A. Lombardo to Paul Krebs (Nov. 7, 1994) [CTRL_HC_00007820].

¹⁸⁴ Student N did not specify what, exactly, he reported to Jones about Strauss.

(i) Student N's Master's Thesis and Related Presentation

The Investigative Team reviewed a copy of Student N's master's thesis, which generally described student-athletes as existing in a high-pressure, exploitative environment. However, the content of Student N's thesis did not corroborate Student N's allegation that he had presented research on "sexual abuse and harassment" relevant to the Independent Investigation. The thesis argued that the high-pressure environment negatively impacted the development of student-athletes and may have contributed to student-athletes engaging in dangerous behaviors, such as abusing substances and committing sexual assault. In one section of the thesis, Student N cited studies purporting to demonstrate that student-athletes are more likely to *commit* sexual assault than non-athlete students, and that "locker room talk amongst male student-athletes promotes a 'rape culture.'"

The research portion of Student N's thesis consisted of a questionnaire administered to incoming freshman student-athletes at four different universities in Ohio, including OSU. It asked 20 questions about the student-athletes' alcohol and drug use, sexual behaviors, perceptions about athletes versus non-athletes, and whether student-athletes talk to their parents about these issues. None of the questions asked about sexual assault, sexual abuse, or sexual harassment.

The section discussing student-athletes' sexual practices was three out of 50 pages of the thesis. Student N's thesis did not raise any concerns or allegations about team doctors, coaches, or other college officials sexually assaulting student-athletes.¹⁸⁵ It also did not reference Strauss, anyone else at OSU, or specific conditions or occurrences at OSU, such as the conditions in Larkins Hall. While Student N outlined several recommendations resulting from his literature survey and research, none of the recommendations related to sexual abuse or harassment issues.

Student N told the Investigative Team that he presented his thesis to Jones and Riffey at a meeting (date unknown).¹⁸⁶ According to Student N, in that meeting, he raised the issue of Strauss' showering with the student-athletes and questioned Jones as to why Strauss had a locker in the student-athletes' locker room. Initially, Student N recalled that he told Jones that Strauss "liked to touch our balls," but later stated that he did not "go into specifics" about Strauss' exams in the thesis presentation meeting. Student N then stated that Strauss' exams were discussed "in the broader context" and not "explicitly." He also said there was not a lot of discussion with Jones because Jones was dismissive and not interested, suggesting that they "move on." Student N said that Riffey was a more active participant in the conversation than Jones. Student N provided no further specifics to the Investigative Team regarding any other occasions in which he reported Strauss' misconduct to Jones.

¹⁸⁵ The thesis did discuss incidents of physical and emotional abuse of student-athletes by their coaches, due to intense pressure to win.

¹⁸⁶ Student N recalled that a third University official also participated in the meeting, although he could not identify that individual with any certainty. Student N credited both Jones and Riffey in his thesis for their support of his research.

We interviewed Jones and Riffe about Student N's allegations. Jones did not recall meeting with Student N about his thesis, nor did he recall Student N (or anyone else) raising allegations or concerns about Strauss to him. Riffe told the Investigative Team that she never heard any issues or concerns about Strauss from student-athletes, and that she did not recall any students saying that Strauss touched them inappropriately. Riffe acknowledged that "it was a topic of conversation" among staff members in Athletics that Strauss "took long showers" at Larkins, but she did not recall any student ever raising concerns about Strauss' shower or locker room behavior to her.

When Riffe was asked about Student N's specific allegations pertaining to her participation in his thesis presentation, Riffe denied being present when Student N allegedly presented his thesis to Jones, and Riffe stated that she was never present when such a thesis was presented because it was "not part of [her] job description." Riffe indicated that, had she heard allegations of abuse by Strauss, she would have acted on it.

(ii) Alleged Reports to Jones, Geiger, and Griffin

Student N also alleged that his head coach, Coach A, "reported multiple cases of sexual assault by Dr. Richard Strauss" to two former Athletic Directors, Jones and Geiger. Student Q similarly alleged that Coach A told Student Q that he reported concerns about Strauss' examination methods to Geiger, and also to Griffin.¹⁸⁷

We interviewed Coach A to confirm whether he had—as alleged by Students N and Q—reported incidents of Strauss' misconduct to Jones, Geiger, or Griffin. Coach A told us that he never reported any concerns about Strauss to Jones, Geiger, or to any OSU Athletic Director. Although Coach A acknowledged that he personally confronted Strauss about Strauss' practice of showering with the student-athletes at Larkins, and on other occasions told Strauss that he was "too hands on" when dealing with the student-athletes for weigh-ins and skin checks, Coach A never escalated those issues further because he felt he had adequately addressed them directly with Strauss. Coach A also stated that none of his student-athletes ever reported any "abuse" by Strauss to him; at the time, Coach A believed that any jokes or innuendos he heard about Strauss were due to Strauss' rumored homosexuality—or simply the student-athletes' discomfort with medical examinations—rather than any abusive conduct by Strauss.

As addressed further in Section VII.A., Coach A told the Investigative Team that he did report concerns to Geiger about voyeurism and other sexual activity (non-specific to Strauss) occurring in Larkins Hall, but not to any other Athletic Director.

With respect to Griffin, Coach A recalled having one conversation with Griffin in which the two discussed—"in passing"—Strauss' rumored/perceived homosexuality. Coach A told the

¹⁸⁷ A third student-athlete also told the Investigative Team that the same coach told the student he was working with Geiger on "getting rid of Strauss and getting the team out of Larkins." The student did not provide additional detail as to what, specific to Strauss, he believed the coach had discussed with Geiger.

Investigative Team that the discussion with Griffin did not touch on any complaints from students or others about Strauss' conduct, but was more a "general statement" that likely came up in the broader context of a discussion regarding the sexualized environment within Larkins Hall, which involved male voyeurs who loitered in the men's locker room, showers, and sauna facilities.

We interviewed Griffin about Coach A's recollection of a "passing conversation" between them about Strauss' rumored homosexuality. Griffin did not recall the incident and noted that—if had the issue been raised in the broader context of the sexualized environment within Larkins Hall—Griffin likely would have been focused on the larger voyeurism concern and not on a passing remark about Strauss' sexual orientation.

Separately, we asked Griffin about allegations made in the *Snyder-Hill* litigation referencing a meeting between one of the plaintiffs and Griffin regarding Strauss' "sexual misconduct."¹⁸⁸ Griffin told the Investigative Team that the allegations were "not true," indicating that he had no recollection of the incident and that he would have recalled it if it were true.¹⁸⁹ No additional allegations were raised to the Investigative Team pertaining to Griffin's alleged knowledge of Strauss' sexual misconduct, and we found no contemporaneous documentary evidence indicating that Griffin had any knowledge of Strauss' sexual misconduct.

Finally, as addressed further in Section VII.A., Griffin confirmed to the Investigative Team that he was aware of concerns (non-specific to Strauss) raised by students and staff regarding the environment at Larkins Hall, insofar that the student-athletes were exposed to voyeurs in the men's locker room and shower facilities.

b. 1994 Complaint from Fencing Coach

The Investigative Team identified a letter dated November 7, 1994, written by OSU's Medical Director/Head Team Physician, Dr. John Lombardo, to Senior Associate Athletic Director Paul Krebs, addressing "concerns" raised by Charlotte Remenyik, the head coach for fencing, regarding the male fencers' discomfort with Strauss.¹⁹⁰ Lombardo's letter alluded to a decade of "rumors" about Strauss, but did not explain in any detail the nature of the rumors or the concerns raised by Remenyik; however, we separately identified contemporaneous evidence confirming that Remenyik complained that Strauss was performing improper or unnecessary

¹⁸⁸ *Snyder-Hill* FAC at ¶ 265 ("Reed also met with Assistant Athletic Director Archie Griffin in Griffin's office to complain about Dr. Strauss's sexual misconduct. As Reed was telling Griffin about Dr. Strauss's sexual misconduct, Griffin had a smirk on his face. Reed interpreted this as Griffin being very familiar with complaints about Dr. Strauss. Griffin told Reed that he would look into the situation.").

¹⁸⁹ Counsel for the plaintiff in *Snyder-Hill* declined the Investigative Team's request to interview the plaintiff regarding his allegations pertaining to Griffin, so we could not make an assessment regarding the credibility of the disputed allegation.

¹⁹⁰ Letter from John A. Lombardo to Paul Krebs (Nov. 7, 1994) [CTRL_HC_00007820].

genital exams on her male student-athletes,

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We were unable to interview Remenyik, who passed away in 2011. Lombardo declined to participate in an interview with the Investigative Team.¹⁹² Krebs cooperated in the Independent Investigation and was interviewed about the November 1994 letter, but indicated that he could not recall anything about the incident.

(i) Lombardo's November 1994 Letter to Krebs

Without specifying the nature of the concerns reported by Remenyik, Lombardo's November 1994 letter indicated that he "investigated the concerns" raised by Remenyik "concerning her athletes and the medical care system."¹⁹³ He wrote that he spoke with Remenyik and concluded that "her concerns are based on rumors which have been generated for 10 years with no foundation."¹⁹⁴ He further wrote, "due to the pervasive nature of these rumors, the male athletes do not feel comfortable with Dr. Strauss as their physician."¹⁹⁵

¹⁹¹ See Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0013-19]; Memorandum from Helen Ninos to David Williams (July 22, 1996) [CTRL_HC_00007572]; Letter from Richard H. Strauss to David Williams (June 3, 1996) [CTRL_HC_00007725].

¹⁹² From May 2018 through December 2018, the Investigative Team made multiple attempts to inform Lombardo about the Independent Investigation and to request his participation in it. On October 24, 2018, a process server attempted to hand deliver a letter from Porter Wright regarding the Independent Investigation to an individual at Lombardo's residence, but the individual refused to accept delivery of the letter. On December 10, 2018, the Investigative Team was notified by counsel for Lombardo that Lombardo was in receipt of Porter Wright's letter dated October 9, 2018. In discussing our request to interview Lombardo, Lombardo's counsel identified several pre-conditions to Lombardo's participation, including (i) indemnification of Lombardo's legal fees, (ii) "confidential" treatment of Lombardo's interview statements, should he participate in an interview with the Investigative Team, and (iii) advance copies of the materials located by the Investigative Team relevant to Lombardo's involvement in any personnel actions relating to Strauss. Lombardo's counsel, Perkins Coie, and Porter Wright had several discussions or communications regarding these pre-conditions until, on February 26, 2019, Lombardo's counsel indicated that (i) Lombardo has no present recollection of any involvement in any personnel actions relating to Strauss, and (ii) Lombardo would not commit to participating in an interview without first being provided with an advance opportunity to review any documentary evidence concerning his involvement. Lombardo's counsel also reiterated his request that the University agree to reimburse Lombardo for expenses, including legal fees. The Investigative Team did not agree to accommodate Lombardo's requirement that he be provided an advance copy of the Investigation materials outside the context of an interview. Such a request ran afoul of the investigative protocol we utilized with all other University employees and would compromise our ability to assess the accuracy of Lombardo's recollection, as well as his credibility, particularly given that Lombardo's counsel represented that Lombardo had no present recollection of any involvement in a personnel action relating to Strauss. Separately, Special Counsel to the University responded that the University could not pay Lombardo's legal expenses because the statutory authority for indemnifying state employees, including by paying legal fees, did not apply in the context of an investigation of this nature.

¹⁹³ Letter from John A. Lombardo to Paul Krebs (Nov. 7, 1994) [CTRL_HC_00007820].

¹⁹⁴ *Id.*

¹⁹⁵ *Id.*

The letter further stated that Lombardo spoke with Strauss “concerning this issue” and indicated that Strauss was “aware of the unfounded rumors which began 10 years ago among the fencers.”¹⁹⁶ It is unclear whether Lombardo concluded that the rumors were unfounded before or after he spoke with Strauss. And, despite concluding that the “pervasive” rumors were unfounded, Lombardo wrote that, “[i]n view of the present situation, Dr. Strauss has suggested that another physician, in this case Dr. Trent Sickles, assume the primary role as physician for the fencers.”¹⁹⁷ Lombardo wrote that he had “spoken with Dr. Sickles and he is agreeable to this.”¹⁹⁸ Lombardo ended the letter stating that “there has been no information given [in his discussions with both Dr. Strauss and Coach Remenyik] which would necessitate further investigation of this situation.”¹⁹⁹

The Investigative Team made multiple requests for an interview with Sickles but did not receive a response from him. We interviewed Krebs about Lombardo’s November 7 letter, given that the letter was addressed to him. Krebs indicated that he had no recollection of receiving the letter or of ever being made aware of a complaint regarding Strauss. Krebs did not recall having any conversations with Lombardo about the issue either.

Due to Lombardo and Sickles’ unwillingness to participate in interviews with the Independent Investigation, and given the fact that both Strauss and Remenyik are deceased, we were unable to answer a number of important questions regarding Lombardo’s “investigation” into the 1994 complaint against Strauss. We were unable to determine what steps, if any, Lombardo took to investigate Remenyik’s complaint, aside from speaking with Remenyik and Strauss. It is unclear whether Lombardo spoke with any student-athletes, additional coaches, trainers, physicians, or others in the Athletics Department when investigating Remenyik’s complaint; we did not identify any evidence that he did, either in our witness interviews or in our review of the documentary record.

(ii) Strauss’ Letter Regarding Fencing Team Complaint

Strauss addressed the 1994 fencing team complaint when the issue arose again in January 1996, following the start of the Student Affairs Investigation into Strauss’ misconduct.^R

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In a letter to OSU’s Vice President for Student Affairs, David Williams, dated June 3, 1996, Strauss stated that Lombardo “looked into” the “concern raised several years ago” by Remenyik, and that Lombardo’s November 7, 1994, letter “clear[ed]” him “of any wrong-doing

¹⁹⁶ *Id.*

¹⁹⁷ *Id.*

¹⁹⁸ *Id.*

¹⁹⁹ *Id.*

²⁰⁰ The joint investigation, as well as the personnel action and State Medical Board investigation that followed, are described in detail in Section VI.C and D.

²⁰¹ See Section VI.D.

and close[d] the case.”²⁰² Strauss also wrote that the “rumors” about him started in 1981 “for reasons that [were] a mystery” to him.²⁰³ Strauss acknowledged that, in approximately 1986, the then-Head Team Physician, Dr. Bob Murphy, “advised” him that the rumors “were persisting in the fencing team.”²⁰⁴ Strauss wrote that he and Murphy “agreed that [Strauss] would make a concerted effort to avoid members of the fencing team unless they specifically asked [Strauss] to treat them—which many did.”²⁰⁵

Strauss attributed the rumors about him to “a personal and continuous vendetta” against him by Coach Remenyik and one former male fencer.²⁰⁶ In the letter, he accused Remenyik of taking “various members of the [fencing] team aside and [telling] them to ‘watch out’ for [Strauss], citing ‘rumors.’”²⁰⁷

The Investigative Team was unable to interview Remenyik (deceased), Lombardo (declined participation), and Murphy (deceased) about Strauss’ references to them in the above-described letter.  [REDACTED]
[REDACTED]
[REDACTED]

(iii) Contemporaneous Accounts to State Medical Board

(a) Richard Strauss

On October 23, 1996, Strauss sent a letter to an investigator at the State Medical Board of Ohio, writing that Remenyik had taken actions “to damage [him] since 1981,” and enclosing copies of his June 1996 letter to Williams and the November 1994 letter from Lombardo to Krebs.²⁰⁸ Strauss also identified an assistant fencing coach who, according to Strauss, had “personally witnessed the destructive activities that Coach Remenyik ha[d] taken against [Strauss] during this period and disagree[d] with them entirely.”²⁰⁹ Strauss claimed that the assistant fencing coach “volunteered” to be interviewed by the State Medical Board investigator, but that the assistant coach should not be contacted at the OSU Athletics Department because “he is at risk of being fired by Coach Remenyik if she learns that you have interviewed him.”²¹⁰ Notably, Strauss did not carbon copy the relevant assistant fencing coach on the letter to the State Medical Board.

²⁰² Letter from Richard H. Strauss to David Williams (June 3, 1996) [CTRL_HC_00007725].

²⁰³ *Id.*

²⁰⁴ *Id.*

²⁰⁵ *Id.*

²⁰⁶ *Id.*

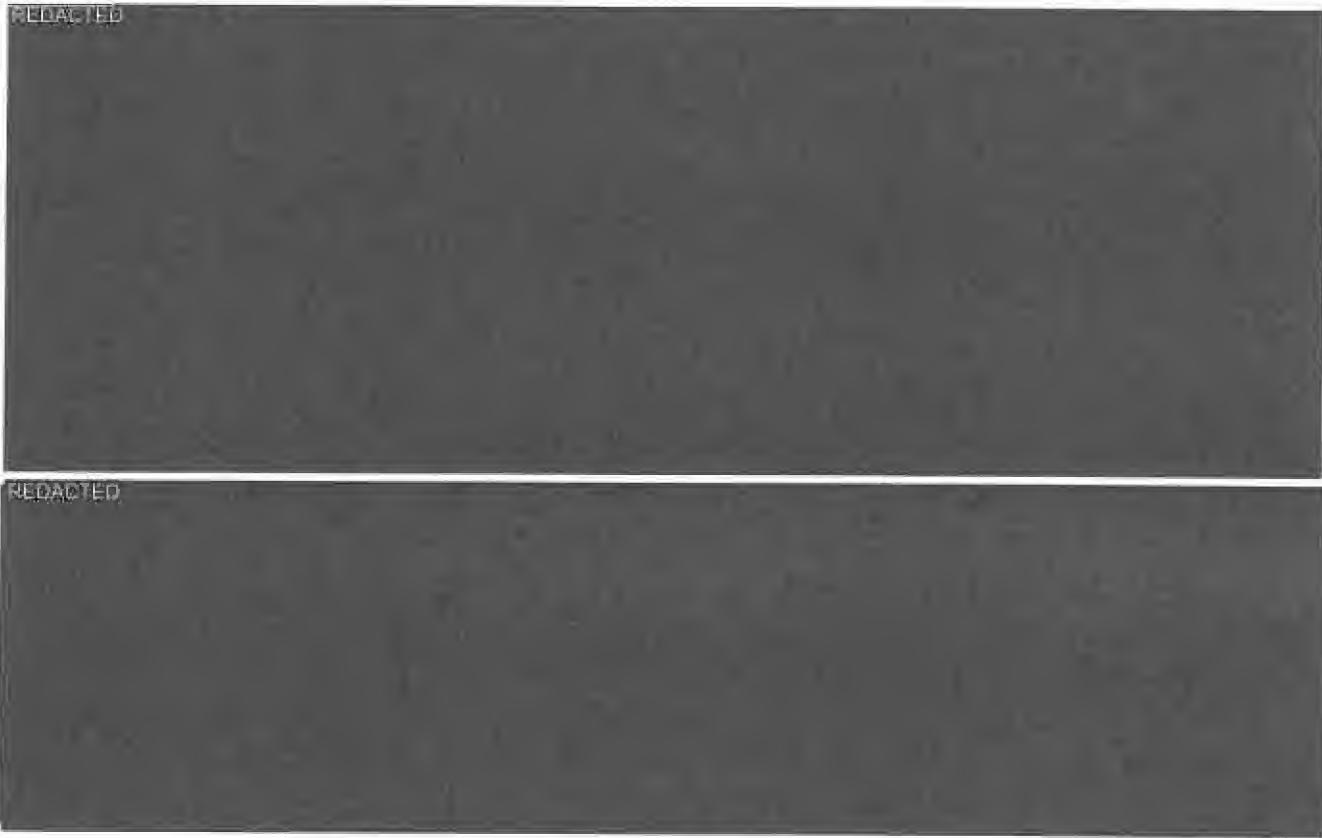
²⁰⁷ *Id.*

²⁰⁸ Letter from Richard H. Strauss to Marcia Barnett (Oct. 23, 1996) [RHS_000713].

²⁰⁹ *Id.*

²¹⁰ *Id.*

The Investigative Team interviewed the assistant fencing coach who Strauss identified in his October 1996 letter to the State Medical Board. The assistant coach had no recollection of the statements attributed to him in Strauss' letter or of ever receiving a copy of the letter. He further stated that Strauss never disclosed to him that Strauss was being investigated by the University or by the State Medical Board regarding complaints of sexual misconduct. At most, Strauss may have asked the assistant coach if Strauss could use the assistant coach's name to verify Strauss' involvement as a team physician in the Athletics Department. The assistant coach indicated that he never spoke with anyone from the State Medical Board about Strauss.²¹¹ He also stated that he never witnessed any "destructive activities" taken by Remenyik against Strauss, as Strauss suggested in his letter.



²¹¹ The assistant coach also stated that he recalled overhearing remarks from male fencers about Strauss, but that he never heard any specific complaint from a male fencer about anything inappropriate happening in the student's medical examination with Strauss. The assistant coach told us that he assumed, at the time, that the fencers were just joking about Strauss because Strauss exhibited effeminate mannerisms.

²¹² Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0017].

²¹³ *Id.*

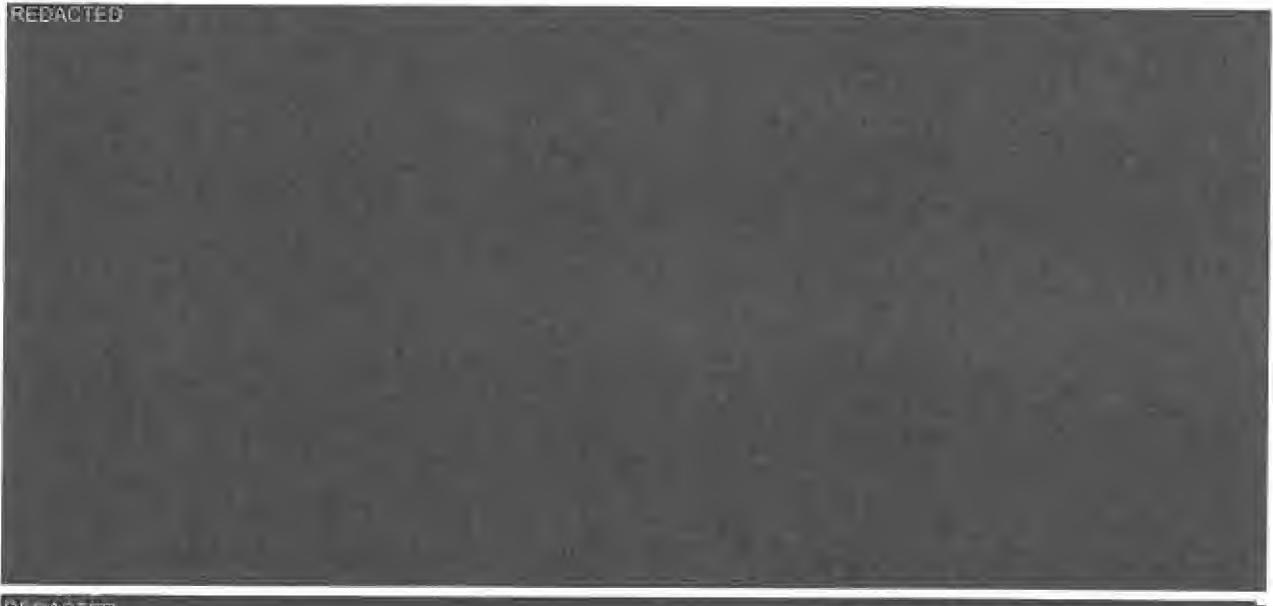
²¹⁴ *Id.*

²¹⁵ *Id.*

²¹⁶ *Id.*

²¹⁷ *Id.* [SMBO_0016].

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²¹⁸ *Id.*

²¹⁹ *Id.*

²²⁰ *Id.*

²²¹ Letter from Helen M. Ninos to Timothy P. Nagy (June 3, 1996) [CTRL_HC_00007532];
see also Letter from John A. Lombardo to Paul Krebs (Nov. 7, 1994) [CTRL_HC_00007820].

²²² Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0016].

²²³ Letter from John A. Lombardo to Paul Krebs (Nov. 7, 1994) [CTRL_HC_00007820].

²²⁴ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0016].

²²⁵ *Id.*

²²⁶ *Id.*

²²⁷ *Id.*

REDACTED



REDACTED



²²⁸ Fax from Helen M. Ninos to John Lombardo (July 31, 1996) (sending proposed edits to Lombardo's written letters regarding Strauss' termination) [CTRL_HC_00007555].

²²⁹ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0016].

²³⁰ *Id.* [SMBO_0016-17].

²³¹ *Id.* [SMBO_0016].  R 

R

²³² *Id.* [SMBO_0016-17].

²³³ *Id.* [SMBO_0016-17].

²³⁴ *Id.* [SMBO_0017].

²³⁵ *Id.*

²³⁶ *Id.*

²³⁷ *Id.*

²³⁸ *Id.*

REDACTED



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²³⁹ *Id.* [SMBO_0016].

²⁴⁰ *Id.*

²⁴¹ *Id.*

²⁴² *Id.*

²⁴³ REDACTED



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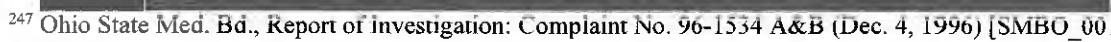
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²⁴⁴ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0016].

²⁴⁵ *Id.*

²⁴⁶ REDACTED



²⁴⁷ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0018].

²⁴⁸ *Id.*

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c. Other Reports to Athletics Department Administrators

The Investigative Team received additional reports from students and staff regarding complaints or concerns about Strauss that were raised to various administrators in the OSU Athletics Department, including several accounts pertaining to the two Head Team Physicians identified above—Murphy and Lombardo—as well as Head Team Trainer, Bill Davis.

(i) Dr. Bob Murphy (Head Team Physician)

In addition to the evidence described above, the Investigative Team identified five witness accounts concerning reports made to Murphy regarding Strauss' misconduct; four of the accounts were provided by individuals who were employed in the OSU Athletics Department during the relevant time period, and one was provided by a student-athlete. We address each below.

- Assistant Athletic Director, Larry Romanoff, told the Investigative Team that sometime in the late 1980s/early 1990s he informally reported rumors about Strauss' showering with the student-athletes to Murphy. Romanoff could not recall Murphy's response to his report but told the Investigative Team that he did not believe Murphy ever followed up with him about it.²⁵⁰

Romanoff confirmed in his interview with the Investigative Team that he heard "rumors" about Strauss from a number of student-athletes, as well as from the Assistant Director of

²⁴⁹ In Section VI.D., we describe other evidence relevant to the State Medical Board's investigation of Strauss in more detail.

²⁵⁰ REDACTED



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Ohio State Med. Bd., Report of
Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0017].

Student Athlete Support Services, John Macko.²⁵¹ According to Romanoff, the rumors about Strauss were that he showered with the students and lingered in the locker room. Romanoff also recalled hearing students “joke” that Strauss would make them “drop their pants” if they went in to be treated for something like a head cold.

- A Team Physician recalled that, in approximately 1989, he witnessed a student emerge from an examination room and announce to the training room that Strauss had administered an inappropriate genital exam. The Team Physician could not recall the precise details of what the athlete said. According to the Team Physician, he spoke with an athletic trainer who also witnessed the student’s response, and the Team Physician and the trainer discussed how a genital examination should be performed and how to determine whether something had “crossed the line.” The Team Physician instructed the trainer to report the details provided by the student to Murphy so that Murphy could investigate and determine whether Strauss’ exam was appropriate.

According to the Team Physician, he later followed up with the trainer to ensure that the issue had been reported to Murphy and addressed. The Team Physician recalled being told that the issue had been investigated; he could not recall whether he ever followed up directly with Murphy about the incident.

- Another Team Physician recalled that in 1992 or 1993, Murphy asked him to perform the annual wrestling physicals instead of Strauss, due to “issues” with Strauss. The Team Physician recalled that the “issues” related to the genital exams performed by Strauss and Strauss’ presence in the student locker rooms and showers. Even prior to Murphy asking him to take over the physicals for Strauss, the Team Physician heard rumors from athletic trainers about Strauss’ showering with the student-athletes.
- A student trainer who later became a full-time staff trainer at OSU told the Investigative Team that, as an intern during the 1979/1980 academic year, he personally observed Strauss’ medical exams of student-athletes. He described Strauss’ technique as always “extra thorough” and noted that regardless of the purpose of the exam, Strauss would instruct the patient to remove his pants so that Strauss could check the lymph nodes in the patient’s groin. The trainer also recalled a particular instance in which he thought it was “strange” that Strauss checked a student’s groin when the student came to Strauss for the treatment of cauliflower ear. Although the trainer observed that Strauss’ methods were “outside the norm,” he did not think the examinations were overly sexual. Nevertheless, the trainer recalled—but did not witness firsthand—that a fellow student trainer²⁵²

²⁵¹ In his interview with the Investigative Team, Macko confirmed that he would often see Strauss in the shower and locker rooms at Larkins, and that Strauss would take noticeably long showers in a “voyeuristic” way, akin to a “Peeping Tom.”

²⁵² We attempted to interview the student trainer who was identified by this witness, but the individual declined to participate in an interview with the Investigative Team.

reported concerns about Strauss' examination methods to Murphy, and possibly also reported to Murphy the fact that Strauss showered with the student-athletes.

- As described in Section V.C., Student E explained that, after suffering an injury his sophomore year, he deliberately sought out a team physician from a different sports team to avoid being examined by Strauss. When questioned by the physician about why he had not gone to see Strauss for the injury, Student E described the extensive genital exams that Strauss performed on him. The physician (whose name Student E could not recall) looked concerned and subsequently brought Murphy into the room. Student E then told Murphy about the extensive genital exams performed on him by Strauss. However, after making the report, Student E never heard anything further from Murphy or the other team physician who examined him.

(ii) Dr. John Lombardo (Head Team Physician)

In addition to the evidence described above, the Investigative Team received six witness accounts from individuals who indicated that they, or others, reported concerns about Strauss' conduct to Lombardo. As noted below, these accounts were provided by individuals who were on staff in the OSU Athletics Department during the relevant time period. We also identified contemporaneous documentation from July 1996 indicating that Lombardo had heard "rumors" about Strauss "for some time" but did not believe he had "sufficient basis to act" because no athlete came to report anything to him directly.²⁵³ The July 1996 documentation did not provide further detail, such as the period of time that Lombardo had heard rumors about Strauss, or what indirect reports Lombardo may have received from student-athletes, or others, regarding Strauss' misconduct.

- One Athletic Trainer told the Investigative Team that in the early 1990s he told Lombardo that he thought it was "inappropriate" for Strauss to be showering with the student-athletes at Larkins Hall and that he had heard reports from others that Strauss' conduct made the student-athletes "uncomfortable."²⁵⁴ According to the Athletic Trainer, Lombardo told him that he would follow up on the report, but the Athletic Trainer suspected that Lombardo had a "don't ask, don't tell" type of attitude regarding Strauss, given that things always remained "status quo" with Strauss. The Athletic Trainer speculated that Strauss' behavior was tolerated by the Head Team Physicians²⁵⁵ because Strauss was willing to provide coverage at Larkins Hall—an aging facility that was an

²⁵³ Memorandum from Helen Ninos to David Williams (July 22, 1996) [CTRL HC 00007572].

²⁵⁴ REDACTED

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See Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO 0016]. REDACTED

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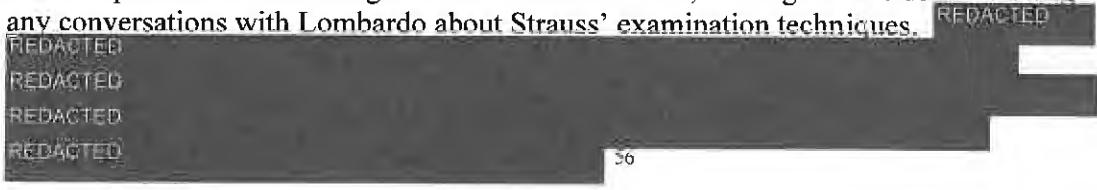
²⁵⁵ The Athletic Trainer also believed that Murphy was made aware of complaints about Strauss, but he could not recall any specific conversations with 100% certainty, as he could with Lombardo.

unpleasant work environment. Finally, the Athletic Trainer said he did not know for sure whether Lombardo ever spoke with Strauss about Strauss' practice of showering with the student-athletes, but the Athletic Trainer noted that, from his perspective, nothing about Strauss' behavior seemed to change after the Athletic Trainer reported his concerns to Lombardo.

- Another Athletic Trainer told the Investigative Team that Assistant Trainer A told him that he reported Strauss' behavior to Lombardo, and that Lombardo responded by asking Assistant Trainer A if he had "specific" examples, but Assistant Trainer A could only cite "general rumors" about Strauss. When we asked Assistant Trainer A about the account, he said that in 1993 or 1994 he reported to Lombardo that he found it "unusual" that Strauss had multiple lockers in Larkins Hall. According to Assistant Trainer A, Lombardo asked him if anyone had complained about Strauss' lockers to Assistant Trainer A, and Assistant Trainer A told him there were no specific complaints but that it was something that Assistant Trainer A heard "remarked upon" by students. We asked Assistant Trainer A if his report to Lombardo regarding Strauss' numerous lockers at Larkins was informed by Assistant Trainer A's knowledge that Strauss was showering with the student-athletes at Larkins, and Assistant Trainer A confirmed that it was. Assistant Trainer A explained that he was aware that Strauss showered with student-athletes multiple times a day, and that Strauss was the only team physician who did so. Assistant Trainer A also explained that Strauss' frequent showering was a source of frustration for him because Strauss would often be unavailable to treat student-athletes in the training room. According to Assistant Trainer A, he was "sure" Lombardo was aware of Strauss' practice of showering with the student-athletes, although Assistant Trainer A could not recall any specific conversation with Lombardo about the issue.
- One Graduate Assistant Trainer who worked in the Larkins training room with Strauss during the 1991/1992 academic year observed that Strauss engaged in "suspect" behavior such as not permitting athletic trainers to observe his exams of student-athletes. According to the Graduate Assistant, he and others found it "unnerving" that Strauss did not permit them to observe the exams, given that their participation was supposed to be a routine part of learning. Although no students complained to him directly about Strauss, the Graduate Assistant heard complaints and jokes about Strauss making student-athletes "drop their pants" for exams, regardless of the medical issue for which they sought treatment. The Graduate Assistant did not personally report or otherwise escalate any concerns about Strauss, but informed the Investigative Team that a fellow Graduate Assistant Trainer reported her concerns about Strauss to Lombardo—specifically, her concerns about the rumors regarding Strauss' seemingly unnecessary genital exams and the fact that Strauss insisted on one-on-one exams with the students.

We interviewed the second Graduate Assistant Trainer to confirm whether she had, in fact, reported any concerns about Strauss to Lombardo. She could not specifically recall discussing her concerns about Strauss with Lombardo, but she indicated that she "probably did" because she discussed her concerns about Strauss "a lot" with others on

the Athletics training staff and noted that she worked extensively with Lombardo and felt comfortable discussing issues with him. She also emphasized to the Investigative Team that, although she overlapped with Strauss for only one academic quarter, it was “immediately” apparent to her that something was “off” with Strauss, including the fact that it was openly known among the Larkins staff that Strauss showered with the student-athletes. In her view, individuals who overlapped with Strauss for any significant period of time would have had to have their “ears plugged, eyes shut, and mouth closed to not realize something was off.”

- Bill Davis, who served as Director of Athletic Training at OSU, told the Investigative Team that he believed he “may have” spoken with Lombardo at some point about Strauss’ practice of showering with the student-athletes, although Davis denied having any conversations with Lombardo about Strauss’ examination techniques. 
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Additional evidence concerning Davis’ knowledge of complaints regarding Strauss’ misconduct is discussed next.

(iii) Bill Davis (Director of Athletic Training)

In addition to the evidence described above from the State Medical Board, the Investigative Team identified contemporaneous documentation from the University’s 1996 personnel action against Strauss which indicated that, in the context of Lombardo’s November 1994 investigation of the complaint made by the fencing coach about Strauss’ sexual misconduct, “Trainer - Bill Davis thought it was [a] powder keg waiting.”²⁵⁷ The contemporaneous documentation did not provide further detail, such as whether the statement was made directly by Davis or whether it was attributed to Davis by another source.²⁵⁸

Furthermore, we received three witness accounts from individuals who indicated that they, or others, reported specific concerns about Strauss’ conduct directly to Bill Davis, as follows.

- A student-athlete (“Student R”) told the Investigative Team that Strauss always required him and his teammates to completely undress for their “hernia exams,” and then would perform genital examinations that lasted up to five or ten minutes. During Student R’s senior year pre-participation physical in 1988, Strauss held and examined Student R’s penis and testicles for an extended period of time, to the degree that Student R suspected

²⁵⁶ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0016].

²⁵⁷ Notes written by Helen Ninos [CTRL_HC_00007827].

²⁵⁸ In an interview with the Investigative Team, Davis indicated he did not recall making this remark.

Strauss would not “have been disappointed” if Student R was brought to erection. During this portion of the exam, Strauss commented that Student R’s summer must not have been “too good” because Strauss did not see any venereal disease on Student R’s genitals. Sometime after this examination with Strauss, Student R and a teammate were questioned by Davis about their examinations with Strauss. According to Student R, he and his teammate told Davis about Strauss’ examinations in detail. Student R recalled that, upon hearing their stories, Davis “had a concerned look on his face.” Student R assumed, at the time, that Davis was conducting an investigation into Strauss and—after his discussion with Davis—Student R thought that Strauss would be fired or removed from his position. Student R told us that he was disappointed that nothing ever happened with Strauss after he and his teammate spoke with Davis about their experiences.

An Assistant Coach separately corroborated the fact that Student R reported his experience with Strauss and that Davis was involved in evaluating Student R’s report. Specifically, the Assistant Coach told the Investigative Team that Student R reported to him that Strauss had “hit on” Student R, although the Assistant Coach could not recall further specifics of what Student R described about the incident with Strauss. The Assistant Coach further recalled that he met with Davis—who was the team’s athletic trainer—as well as the team’s head coach to discuss Student R’s report.²⁵⁹ According to the Assistant Coach, Davis and the head coach “decided then and there” that “Strauss would never see an athlete without a trainer in the room.” The Assistant Coach did not recall that anyone ever told Strauss about the impromptu trainer supervision/chaperoning practice, but the Assistant Coach stated that, from that point on, he understood that Davis ensured that there was always a student trainer in the training room with Strauss whenever Strauss treated a student-athlete from that team.

- Another student (“Student S”) who was employed in the OSU Athletics Department told the Investigative Team that he was treated by Strauss in the early 1990s for a fungal infection on his back. Strauss did not wear gloves for the examination and Strauss also insisted that Student S remove his pants for a genital examination. Strauss proceeded to conduct a “thorough” examination of Student S’ genitals, even though Student S made it clear to Strauss that the fungal infection was limited to his back.

While Student S did not immediately report his experience with Strauss to anyone at OSU, in a subsequent year, the topic of Strauss came up in an impromptu conversation that Student S was having with Davis at an athletic event. According to Student S, once he began telling Davis about the above-described medical exam with Strauss, Davis asked Student S if they could move the discussion to a private area. Student S explained that he and Davis moved to a private location and that Davis took handwritten notes of the information that Student S provided to him about the medical exam with Strauss.

²⁵⁹ We conducted an interview with the head coach in question, but he indicated that he did not recall the incident described.

In his interviews with the Investigative Team, Davis explained that he first interacted with Strauss when Davis was working as a student athletic trainer at OSU from 1975 to 1979.²⁶⁰ Davis left OSU after graduation but returned in 1984 to serve as a staff assistant trainer. Davis was later promoted to “co-head athletic trainer,” and ultimately became the head athletic trainer (“Director of Athletic Training”) at OSU after the previous longstanding “co-head” trainer passed away in February 1995.

Davis told the Investigative Team that he did not recall the incidents outlined above, and that he did not recall implementing a chaperoning or “increased surveillance” practice for Strauss following any student complaints. Davis indicated that, unlike other team physicians, it was “more routine” for Strauss to treat students alone, and Davis acknowledged that he “may have” heard “secondhand” or “thirdhand” comments about “odd things” happening during Strauss’ exams, but Davis denied ever hearing specific reports of Strauss’ conducting unnecessary genital exams on students who went to be treated for unrelated injuries or illnesses. Davis indicated that it was “potentially true” that there were “rumors” about Strauss that Davis was aware of at the time, including that Strauss would shower with the teams in Larkins Hall and that Strauss would linger in the shower for a long time.

As reported above, Davis told the Investigative Team that he believed he “may have” spoken with Lombardo at some point about Strauss’ practice of showering with the student-athletes, although Davis denied having any conversations with Lombardo about Strauss’ examination techniques.



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2. Other Team Physicians/Sports Medicine Fellows

Five team physicians and/or Sports Medicine Fellows whose employment at OSU overlapped with Strauss confirmed during their interviews with the Investigative Team that they

²⁶⁰ Strauss began his employment at OSU in September 1978.

²⁶¹ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0016].

were aware of rumors or complaints about Strauss dating back to the early 1980s and extending into the late 1990s. Two of the five relevant accounts are summarized above, as two of the physicians told us that they reported the rumors or complaints that they heard about Strauss to Head Team Physician, Bob Murphy. The additional accounts provided by physicians in the Athletics Department are summarized below.

- One Team Physician confirmed that he heard rumors in the 1990s that Strauss was “infatuated” with the wrestling team, and that Strauss would time his workouts to coincide with the wrestling team’s workouts so that Strauss could shower with the team. According to the Team Physician, he heard these rumors from an athletic trainer (whose name he could not recall) and thought it was “weird and voyeuristic” but nothing more. The Team Physician did not report or otherwise escalate these rumors.
- Another Team Physician confirmed that she heard rumors in the 1990s that Strauss took “a very long time” to conduct hernia exams. She also confirmed that she heard rumors that Strauss showered with athletes or was otherwise present when the athletes showered. She indicated that it was “highly unusual” for a team physician to shower with student-athletes. The Team Physician stated that the rumors she heard came to her fifth or sixth hand and she did not report or otherwise escalate these rumors.
- Another Team Physician recalled hearing rumors in the 1990s that Strauss “enjoyed” taking care of the male teams and that Strauss conducted thorough genital exams which included checking the lymph nodes in male patients’ groins even when it was not medically necessary. The Team Physician did not report or otherwise escalate these rumors, instead describing them as “lighthearted” rumors of behavior that was not egregious enough to report. The Team Physician thought he probably heard the rumors from the athletic trainers or medical staff, and maybe (although less likely) the physicians.

3. Athletic Trainers

We received reports from two students (“Student T” and “Student U”) who separately identified an OSU athletic trainer (“Athletic Trainer A”) to whom they reported—or who they believe witnessed—Strauss’ sexual misconduct. The Investigative Team could not interview Athletic Trainer A, who is deceased, but we summarize below the student accounts pertaining to his knowledge, as well as a separate account from a former team physician regarding Athletic Trainer A’s knowledge of Strauss’ misconduct.

Additionally, four OSU athletic trainers whose employment overlapped with Strauss confirmed during their interviews with the Investigative Team that they were aware of rumors or complaints about Strauss from students or staff dating back to the late 1970s and extending into the late 1990s. We summarize below any additional relevant factual information provided by the athletic trainers that was not separately reported above.

a. Athletic Trainer A

- Student T was a student-athlete who suffered a hamstring injury in the early 1980s and was treated for the injury by Strauss at the Biggs Facility. During the examination, Strauss moved his hands up Student T's thigh and cupped the buttocks. While this was occurring, Athletic Trainer A suddenly entered the room and startled Strauss. Student T believed that Athletic Trainer A saw what was happening, but Athletic Trainer A did not discuss the incident with Student T after it occurred.
- Student U was a student who worked under Athletic Trainer A as a student trainer in the OSU Athletics Department during the mid-1980s. Student U inadvertently suffered a head injury at an Athletics event one night and required medical treatment from Strauss. While in a training room at St. John Arena, Strauss administered Student U an injection before proceeding to stitch his head wound. Student U lost consciousness and awoke to find Strauss sitting by his side and rubbing Student U's thigh.²⁶² Student U also found that his pants had been unbuttoned and his zipper was pulled down. Student U reported the details of the incident to Athletic Trainer A but was told to "not worry" about it, and "that's just the way Dr. Strauss is."

The following year, when Student U was experiencing some testicular pain, Athletic Trainer A suggested that he go see Strauss. Student U met Strauss at Larkins for the examination. Strauss first examined Student U's testicles, which seemed appropriate to Student U, given the pain he was experiencing there. However, Strauss then proceeded to "repeatedly" examine the head of Student U's penis, to the degree that Student U believed Strauss was attempting to stimulate him to an erection. Student U again reported the details of the examination to Athletic Trainer A, but was again told to "not worry about it." Student U told the Investigative Team that he trusted Athletic Trainer A and thought he would have "looked out" for the student trainers.

- Lastly, a Team Physician interviewed by the Investigative Team recalled hearing some trainers, including Athletic Trainer A, making comments about the fact that Strauss showered with the student-athletes. The Team Physician recalled that the trainers did not seem to want to "open up about any of it" to him.

b. Witness Statements from Other Athletic Trainers

- One Athletic Trainer stated that it was a "known fact" among the athletic training staff that Strauss had "suspect techniques," and he recalled observing that Strauss would insist on having one-on-one exams with the student-athletes during their annual pre-participation physicals at the Biggs Athletic Training Facility, even though the normal practice at the time was for the doctors to have a trainer with them during the exams. The

²⁶² Relatedly, the Investigative Team interviewed another former student who reported that Strauss "stroked" the student's genitals when the student was physically incapacitated.

Athletic Trainer also indicated that he heard secondhand remarks from other training staff that Strauss was “too handsy” with the student-athletes and that Strauss insisted on performing genital exams on male athletes who were being treated for conditions such as a head cold. The Athletic Trainer also recalled hearing reports from other trainers that some of the student-athletes would go off-campus to have their pictures taken by Strauss, which he found “strange” at the time. Lastly, as noted above in our section addressing reports that were made to Lombardo, the Athletic Trainer told the Investigative Team that, in the early 1990s, he told Lombardo that he thought it was “inappropriate” for Strauss to be showering with the student-athletes at Larkins Hall. However, Lombardo never followed up with the Athletic Trainer about the showering concern.

- Assistant Trainer A told the Investigative Team that he first interacted with Strauss when Assistant Trainer A was working with the ice hockey team as a student athletic trainer in 1988. After graduating from OSU in 1991, Assistant Trainer A returned to the University in 1993 as an Assistant Athletic Trainer, ~~at which point he had much more extensive contact with Strauss at Larkins Hall.~~ [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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In his interviews with the Investigative Team, Assistant Trainer A stated that it was Strauss’ practice to conduct examinations on the male student-athletes in a one-on-one setting. Assistant Trainer A indicated that it was “understood” within the Athletics Department that Strauss was the only team physician who conducted the physicals in a one-on-one, “closed door” setting. Assistant Trainer A also told the Investigative Team that he recalled occasions in which student-athletes would emerge from their examinations with Strauss visibly or vocally upset. Assistant Trainer A told us that, “in the back of [his] head” he assumed Strauss was conducting unnecessary genital examinations on the students because “Strauss conducted ‘hernia checks’ on everything.” Assistant Trainer A did not indicate that he personally witnessed Strauss conducting unnecessary or extended hernia or genital exams, but he told us that he heard rumors about Strauss conducting unnecessary “hernia examinations” on student-athletes who were being treated for unrelated conditions such as a head cold or an elbow injury. Assistant Trainer A said that it “never occurred to him” to report the rumors about Strauss’ unnecessary hernia exams to anyone. Assistant Trainer A told the Investigative Team that “no one ever said why they weren’t comfortable with Strauss, they just said they were uncomfortable.”

²⁶³ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMB0_0018].

Assistant Trainer A also recalled hearing male student-athletes complain about how long Strauss' examinations took, whereas female student-athletes complained that Strauss was generally dismissive of their medical needs.

We informed Assistant Trainer A that a student-athlete ("Student V") told the Investigative Team that, following an incident in which Strauss performed an impromptu genital examination on Student V in the Larkins Hall locker room, Student V went to see his family physician back home and requested that his family physician provide him with a medical note so that Student V would not need to be examined by Strauss again. After Strauss discounted the note from Student V's family physician, Student V spoke with Assistant Trainer A about not wanting to be examined by Strauss again. (Student V did not recall telling Assistant Trainer A the specific details regarding his examinations with Strauss). According to Student V, Assistant Trainer A told him that he would accompany Student V in any future examinations with Strauss, although ultimately it was not necessary for Assistant Trainer A to do so because Student V stopped competing in University Athletics. Student V also recalled that, in approximately 1996 or 1997—after Student V had graduated—Assistant Trainer A contacted him to see if he would be willing to "testify" about Strauss at a "hearing."²⁶⁴ Student V told us that he "was caught off guard" by Assistant Trainer A's request and decided not to testify, given that he was unprepared and was not sure if he would remain anonymous.

When we asked Assistant Trainer A about the incident with Student V, he recalled that Student V "did not like Strauss and did not want to have a physical with" Strauss. Assistant Trainer A also recalled that he told Student V that the note from the family physician would suffice in place of a physical administered by Strauss. Separately, Assistant Trainer A did not recall contacting Student V in 1996 or 1997 to ask that he testify in a proceeding relating to Strauss. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

We also asked Assistant Trainer A about a number of reports we received from student-athletes and student trainers indicating that the trainers developed an "informal" chaperoning system to keep an eye on Strauss when Strauss was performing examinations on the male athletes. Assistant Trainer A said that he did not recall an informal or formal chaperoning system for Strauss, but he did recall that there were times when Assistant Trainer A would refuse to vacate the training room office in Larkins, as requested by Strauss. However, Assistant Trainer A indicated that his refusal to leave the

²⁶⁴ [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

office was not an effort to chaperone Strauss' examinations but rather due to the fact that the trainers shared the Larkins office with Strauss and it would interfere with their job to constantly vacate the space to accommodate Strauss.

Additionally, we informed Assistant Trainer A that a plaintiff in the *Snyder-Hill* action alleged that, after the plaintiff's first physical with Strauss, in which Strauss touched and manipulated the plaintiff's penis and testicles, the plaintiff told Assistant Trainer A that the physical did not seem appropriate. According to the plaintiff, Assistant Trainer A told him that he would follow up with Strauss about the complaint. When we asked Assistant Trainer A about the *Snyder-Hill* allegations, he responded that he did not recall the conversation or recall raising the complaint to Strauss, but Assistant Trainer A noted it "was possible" he had. Assistant Trainer A added that, if the conversation had occurred between him and the plaintiff, Assistant Trainer A likely would not have escalated the report "up the chain" because what the student described was "common knowledge."

Finally, as noted above, Assistant Trainer A also told us that he was aware that Strauss showered with student-athletes multiple times a day, and that Strauss was the only team physician who did so. Assistant Trainer A stated that, "in retrospect," he thinks Strauss' behavior was tolerated in the Athletics Department because Strauss was willing to cover events and other tasks that other physicians might not be available or willing to do.

4. Coaching Staff

With the exception of the complaints received and escalated by Charlotte Remenyik, the head coach of OSU's fencing team, we did not identify any other contemporaneous documentary evidence indicating that members of the OSU coaching staff, including head coaches or assistant coaches, received or were aware of complaints regarding Strauss sexual misconduct. However, the Investigative Team received allegations from numerous student-athletes indicating that they talked about Strauss' inappropriate genital exams and complained about Strauss' locker room and shower room voyeurism, directly to—or in front of—OSU coaching staff. We could not make conclusive determinations about each and every allegation made about a particular coach's knowledge; a number of coaches denied (or did not recall) being aware of any complaints or even rumors about Strauss, and—as noted above—we did not locate documentary evidence indicating otherwise. But, consistent with the findings described above, 22 coaches confirmed to the Investigative Team that they were aware of rumors and/or complaints about Strauss, dating back to the late 1970s and extending into the mid-1990s. We have focused our summary below on the most illustrative examples of such knowledge within the OSU coaching staff, and have not repeated accounts from coaches that were summarized above.

- An Assistant Coach reported that, in the early 1980s, he became aware of student-athletes complaining that Strauss engaged in "inappropriate actions" during their medical exams. As one example, the Assistant Coach identified a student-athlete who separately contacted the Investigative Team to report an abusive pre-participation physical with

Strauss in which, among other things, Strauss required the student-athlete to walk from one end of the room to the other while completely naked so that Strauss could purportedly analyze the student-athlete's gait.²⁶⁵ The Assistant Coach told us that he thought the student-athlete's head coach reported Strauss to the University and said that he did not want Strauss performing physicals on his athletes anymore.

The Investigative Team separately interviewed the Head Coach identified by the Assistant Coach. The Head Coach recalled one occasion in which a student-athlete complained to him about feeling "very uncomfortable" during a groin examination performed by Strauss, but the Head Coach told us that he did not think to report it at the time because, in general, groin injuries "can feel uncomfortable." The Head Coach did not recall other incidents where student-athletes complained to him about Strauss' exams.

- One Head Coach told the Investigative Team that he first heard rumors about Strauss shortly after he began coaching at the University in late 1980s. Specifically, as his student-athletes lined up at the Woody Hayes Athletic Center for their pre-participation physicals, the Head Coach observed that Strauss had a separate, closed-off examination room, in contrast to the other team physicians and trainers who had "open stations" where they performed a different segment of the student-athlete's physical. The Head Coach understood that Strauss performed hernia checks on the student-athletes in the closed-off examination area. The Head Coach recalled hearing from the student-athletes that Strauss would look at their penises and lift their penises up during their "hernia exams" rather than just asking them to cough. The Head Coach said that his student-athletes did not tell him that Strauss' touching escalated to "fondling" or "stroking." The Head Coach told us that, after hearing what the student-athletes were saying about Strauss, he announced very loudly, such that he believed Strauss could hear him, that the students should let him know if anything happened and stated, "That's not happening on my watch." The Head Coach told us that he let his "voice carry" so that Strauss, and everyone else in the training room, was "on notice" that the Head Coach was monitoring the situation. The Head Coach believed that Strauss was deterred from engaging in misconduct with his student-athletes as a result.
- After first telling the Investigative Team that he had no information relevant to the Independent Investigation, another Head Coach told us that "a couple" of his student-athletes "mentioned" to him that Strauss was showering with the team in the Larkins locker room. We asked the Head Coach what he said or did in response to the reports from the student-athletes, and he told us that he said, "oh" and did nothing further because "there were other faculty members" who showered at Larkins too. The Head Coach did not recall when the student-athletes reported Strauss' showering issue to him

²⁶⁵ The student-athlete's account was described in Section V.A.

but, given the Head Coach's period of employment at OSU, it likely occurred in the 1980s.

- Another Head Coach told the Investigative Team that, although no student-athletes reported "inappropriate conduct" by Strauss to him, he recalled overhearing some upperclassmen athletes "joking" with the freshman athletes about getting their physicals from Strauss, saying things like Strauss "really gets into" the exams. As a result, the Head Coach told us that he questioned Strauss about the exams and Strauss replied that he was "being thorough" and "checking all glands for steroid use and possible hernias." The Head Coach said that he believed what Strauss told him, and—at a later point—even had Strauss perform physicals on his own children (although the Head Coach recalled being in the room for the physicals that Strauss performed on the Head Coach's children).
- Another Head Coach vividly recalled that Remenyik repeatedly raised concerns about Strauss' "inappropriate behavior with her male fencers," and that Remenyik would get "really upset" when discussing her concerns about Strauss with the other women coaches. The Head Coach also recalled witnessing Remenyik report her concerns about Strauss to Phyllis Bailey, an Assistant Athletics Director at OSU. The Head Coach recalled that Bailey appeared to be very concerned about Remenyik's report and that Bailey indicated she would look into it. The Head Coach speculated that any efforts Bailey may have taken to address Strauss could have been stymied by the fact that the Women's Athletics program, at the time, did not have much institutional power at the University. The Investigative Team conducted an interview with Bailey, who is now in her 90s. Given her advanced age, Bailey could not recall any information about Strauss, and had difficulty recalling other facts, such as the year she retired from the University. Bailey apologized for her inability to assist in the Independent Investigation.

5. Student Athletic Trainers

Eighteen student trainers told the Investigative Team that they were aware of rumors or complaints about Strauss dating back to the 1970s and extending into the late 1990s. We have focused our summary below on the most illustrative examples of such knowledge, and have not repeated accounts from student trainers that were summarized above.

- A Student Trainer from the early 1990s recalled hearing the student-athletes discuss how Strauss would always conduct genital examinations on them, regardless of the issue that required treatment. According to the Student Trainer, some student-athletes eventually started asking him to accompany them to their examinations with Strauss, telling him that they "really want[ed] someone to be in the room" when they saw Strauss. The Student Trainer noted that, even if a student came in with an ailment such as a cold, Strauss would check the glands in the student's groin.

The Student Trainer also recalled that the examination area had a curtain that Strauss could pull closed to afford patients privacy during their exams. Due to their discomfort

with Strauss' exam methods, the student trainers came up with a system whereby, if they noticed Strauss' pulling the privacy curtain closed when a patient came to see him for an injury or illness that would not generally require privacy, a student trainer assigned to that athlete's team would enter and watch the exam, using the excuse that he wanted to use it as a learning opportunity. The Student Trainer estimated that he personally did this around 50 times during his time in Athletics, and that there were five or six other student trainers who would use this informal chaperoning system with Strauss. The Student Trainer did not otherwise report or escalate any concerns about Strauss.

- Another Student Trainer from the 1980s explained that Strauss would often "kick the trainers out" of the exam room and close the door to conduct exams of certain athletes. The Student Trainer explained that he and the other trainers would speculate as to why Strauss demanded that level of privacy, given that no other team physician did. Additionally, the Student Trainer recalled hearing athletes say things like "oh boy here we go" before a physical and described one student-athlete who seemed to "dread" seeing Strauss and who complained that Strauss would make him undress completely and examine everything "down there." The Trainer did not report or otherwise escalate any concerns about Strauss, noting that Strauss was "frosty" towards them and the student trainers did not "challenge" Strauss.
- Another Student Trainer from the 1980s recounted an instance in which a student-athlete pulled his groin muscle. The student-athlete told the Student Trainer that he did not want to go into the exam with Strauss by himself and pulled on her arm to get her to come with him. The Student Trainer told the Investigative Team that it was "widely known" among the athletes and training staff that Strauss was inappropriate. The Student Trainer did not report or otherwise escalate any concerns about Strauss.

B. Student Health Services

As reported in Section IV, the Investigative Team identified records indicating that Strauss began "part-time" work at Student Health Services in or around early 1980 and continued working there until 1996. Beginning in approximately July 1994, Strauss saw Men's Clinic patients approximately two hours per day throughout the academic school year.²⁶⁶

1. Overview of Findings Regarding Student Health Complaints

In January 1995, two student-patients (Students A and B) from the Student Health Men's Clinic separately reported complaints about Strauss to Student Health administrators. As described below, a limited "investigation" was undertaken and no substantive personnel action was taken against Strauss at that time. However, approximately one year later, in January 1996, a third student-patient (Student C) of the Student Health Men's Clinic reported to Student Health administrators that Strauss had fondled him during a genital examination, in addition to other

²⁶⁶ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

inappropriate conduct. Within a few days of Student C's complaint, Strauss was placed on administrative leave as a physician with both Student Health and Athletics (both of which were departmentally housed under OSU's Office of Student Affairs). Shortly thereafter, Student Affairs began an investigation that ultimately resulted in Strauss' removal as a physician in Student Health and Athletics.

In addition, we received reports that members of the OSU Student Health nursing staff (including patient care technicians) observed unusual conduct on the part of Strauss, such as a failure to adhere to normal appointment scheduling protocols and medical recordkeeping for the student-patients he treated, inordinately long appointment times, and a refusal to allow a patient care technician to interact with his student-patients. We also spoke with a patient care technician who reported to us that, in approximately 1995, he was instructed by the Student Health Director, Ted Grace, to serve as a "chaperone" whenever Strauss needed to perform a genital exam on student-patients of the Student Health Men's Clinic.

Prior to the complaints raised against Strauss by Students A and B in 1995, we found evidence that Student Health staff members escalated concerns about Strauss' lack of adherence to medical recordkeeping practices (and scheduling protocols for student-patients) to at least two Student Health Directors, and that members of the Student Health nursing staff suspected that Strauss maintained secrecy around his appointments with certain male student-patients because he was engaged in inappropriate sexual activities during those noticeably lengthy appointments. Despite those suspicions, nursing staff did not witness any inappropriate sexual misconduct firsthand, and thus limited their reports to concerns about Strauss' unusually long appointment times and failure to adhere to Student Health Center recordkeeping protocols.

We did not find evidence that any reports of suspected or confirmed sexual misconduct by Strauss were escalated beyond Student Health to the attention of other University administrators until January 1996.

2. Complaints Reported to Student Health Directors

Over the length of time that Strauss was at OSU, five different individuals served in the role of Student Health Director (or Acting Director): Spencer Turner (1970–December 1980),²⁶⁷ Doris Charles (August 1981–approximately June 1990), Forrest Smith (July 1990–approximately January 1992), Eric Busch (approximately January 1992–approximately July 1992), and Ted Grace (August 1992–July 2008).²⁶⁸ Only Turner and Charles agreed to participate in interviews with the Investigative Team; Smith and Busch both affirmatively declined to participate in interviews. As described further below, Grace initially spoke with the Investigative Team upon our initial outreach, but later declined to participate in a formal interview.

²⁶⁷ Strauss did not begin his employment at OSU until September 1978.

²⁶⁸ Strauss' effective retirement date from OSU was March 1, 1998.

We did not receive any allegations (or identify any records suggesting) that Turner or Busch had knowledge or awareness of Strauss' abuse of students. Evidence concerning any reports or complaints about Strauss that were made to Charles, Smith, or Grace is addressed below.

a. Dr. Doris Charles and Dr. Forrest Smith

(i) 1982 Report Criticizing OSU's Sports Medicine Program

In 1982, the primary physician in the Student Health Center's Sports Medicine Clinic, Dr. David Henderson, drafted a report summarizing his concerns about the quality of medical care being delivered to student-athletes at OSU.²⁶⁹ Henderson's draft report was intended to be included as the Sports Medicine Clinic's contribution to the Annual Report of the Student Health Center for the University's 1981/1982 fiscal year. However, upon receiving Henderson's draft report, the Director of University Health Services ("Director of Student Health"), Dr. Doris Charles, made substantial revisions, largely eliminating Henderson's criticisms.²⁷⁰

Henderson's initial draft raised several wide-ranging concerns about Sports Medicine at OSU, including a vague criticism regarding Strauss.²⁷¹ Specifically, Henderson wrote that Strauss had "no formal agreement with the Athletic Department nor with the University Health Service," and stated that "[Strauss] works for no one, answers to no one, and is accountable to no one."²⁷²

Given the reference to Strauss, and taken in context with Henderson's broader criticisms about the University's Sports Medicine program, we conducted further investigation to determine whether Henderson's references to Strauss were rooted in any concerns regarding sexual misconduct. While our follow-up with Henderson indicated that his remarks regarding Strauss were not related to any sexual misconduct concerns, we believe further discussion of our investigative findings is warranted here, particularly because Henderson's concerns were escalated to Dr. Bob Murphy, the Head Team Physician and Director of OSU's Sports Medicine Division, and to University President Edward Jennings.²⁷³

²⁶⁹ Letter from David E. Henderson to Edward H. Jennings (Sept. 30, 1982) [CTRL_HC00024437].

²⁷⁰ Ohio State Univ., Univ. Health Serv., Annual Report: Athletic Medicine Section (1981–82) [CTRL_HC00024437].

²⁷¹ Letter from David E. Henderson to Edward H. Jennings (Sept. 30, 1982) [CTRL_HC00024437].

²⁷² *Id.*

²⁷³ Beginning in 1978, Henderson was responsible for drafting the Sports Medicine Clinic's contribution to the Student Health Center's Annual Report. Henderson originally reported to Dr. Spencer Turner, the Student Health Director and Associate Head Team Physician. However, Turner retired in 1980, and Charles began her service as Student Health Director in August 1981. Effective October 1, 1982, Henderson ended his affiliation with the Sports Medicine Clinic and left OSU. Henderson drafted his report on the Sports Medicine Clinic prior to his departure. See *id.*

(a) Henderson's Criticisms of Sports Medicine at OSU

Setting aside his reference to Strauss, the primary issue addressed in Henderson's draft report was the decline in patient visits to the Sports Medicine Clinic.²⁷⁴ Accordingly, Henderson noted that visits to the Sports Medicine Clinic during the 1981–1982 academic year totaled 1,277 (comprised of 847 women and 430 men), which was a total decline of 21% from the prior year—with male patient visits down 42%.²⁷⁵ In light of the decreasing number of patients, Henderson expressed concern about the future of the Sports Medicine Clinic and cited several factors that he believed were contributing to “poor attendance” in the Sports Medicine Clinic.²⁷⁶

Henderson's draft report suggested that the main reason for the decrease in patients at the Sports Medicine Clinic was that male athletes were being treated elsewhere on campus. For instance, he noted that male athletes received medical treatment in training rooms at practice facilities, and by physicians with “no formal agreements” with OSU Student Health or the Athletics Department.²⁷⁷ He also alleged that no formal medical records, only “training-room records,” were being maintained at the practice facilities.²⁷⁸

Relatedly, Henderson wrote that Strauss had “no formal agreement with the Athletic Department nor with the University Health Service,” and stated that “[Strauss] works for no one, answers to no one, and is accountable to no one.”²⁷⁹

Henderson's draft concluded that “[m]edical care to athletes at The Ohio State University is disjointed and poorly organized,” reiterated that medical records for student-athletes were not being appropriately kept, and urged that medical care for student-athletes be administered through Student Health Services.²⁸⁰

(b) Student Health Director's Revisions to Henderson's Report

In the revised (undated) version of Henderson's report, Charles retained the statistics related to patient decline in the Sports Medicine Clinic but offered a different interpretation.²⁸¹ She attributed the decline in patient visits to two causes: first, she noted that after her arrival at

²⁷⁴ Decreases in visits to the Sports Medicine Clinic were also noted in the 1978–1979 Student Health Center Annual Report. See Ohio State Univ., Univ. Health Serv., Student Health Center Annual Report (1978–79) [CTRL_HC_00132961] (“A marked decrease was noted in the number of patient visits to this clinic during the year.”). The 1980–1981 Student Health Center Annual Report contained similar findings. See Ohio State Univ., Univ. Health Serv., Student Health Center Annual Report (1980–81) [CTRL_HC_00030538] (“Despite a rise in visits during 1979-1980, this year saw a substantial drop in visits.”).

²⁷⁵ Letter from David E. Henderson to Edward H. Jennings (Sept. 30, 1982) [CTRL_HC00024437].

²⁷⁶ *Id.*

²⁷⁷ *Id.*

²⁷⁸ *Id.*

²⁷⁹ *Id.*

²⁸⁰ *Id.*

²⁸¹ See Ohio State Univ., Univ. Health Serv., Annual Report: Athletic Medicine Section (1981–82) [CTRL_HC00024437].

OSU there was a “less aggressive effort to attract patients away” from other University sources of medical care for student-athletes, based on her “careful appraisal of the total medical care scene;” second, she justified allocating fewer physician hours to the Sports Medicine Clinic due to the decline in demand over the past two years.²⁸² Charles acknowledged that medical care for the student-athletes was being “provided in large measure by professional personnel working primarily within” the Athletics Department, and using on-site practice facilities, in concert with resources provided by Student Health and the University Hospitals.²⁸³ Her overall assessment was that the Sports Medicine Clinic remained “a major factor in the total program.”²⁸⁴

(c) Henderson’s Escalation to President Jennings

On September 30, 1982, Henderson sent a letter to President Jennings informing him that Charles had revised Henderson’s draft report regarding the Sports Medicine Clinic, and enclosing copies of the original draft report and Charles’ revised version.²⁸⁵

On October 1, 1982, Charles forwarded Henderson’s letter (with enclosures) to the Executive Associate Vice President for Academic Affairs, Dr. William “Bill” Nester, with a cover letter in which she defended her revisions to Henderson’s draft report, and criticized Henderson for being “parochial” in his views on the Sports Medicine program and for his “laissez-faire” service in the Sports Medicine Clinic.²⁸⁶ She also noted that Henderson’s draft report “contains some aspersions and comments” pertaining to the Head Team Physician (Murphy) and Strauss, and noted that she was forwarding copies of the relevant documents to them.²⁸⁷ On October 5, 1982, Jennings asked Charles to send him a copy of her response to Henderson’s letter, and copied Nester.²⁸⁸

In a letter to Henderson dated October 14, 1982—copying President Jennings, Nester, Murphy, and Strauss—Charles responded to Henderson’s critiques.²⁸⁹ In relevant part, Charles noted that Murphy and Strauss were appointed Director and Associate Director, respectively, of the Sports Medicine Division at OSU in 1980,²⁹⁰ and that both doctors were “providing a learning experience of high quality” for medical students interested in pursuing sports medicine.²⁹¹ She defended the “need to draw upon resources made available by the Athletic

²⁸² *Id.*

²⁸³ *Id.*

²⁸⁴ *Id.*

²⁸⁵ Letter from David E. Henderson to Edward H. Jennings (Sept. 30, 1982) [CTRL_HC00024437].

²⁸⁶ Letter from Doris I. Charles to William Nester (Oct. 1, 1982) [CTRL_HC_00000614].

²⁸⁷ *Id.*

²⁸⁸ Fax from Edward H. Jennings to Doris I. Charles (Oct. 5, 1982) [CTRL_HC00024437].

²⁸⁹ Letter from Doris I. Charles to David E. Henderson (Oct. 14, 1982) [CTRL_HC00024437].

²⁹⁰ Charles’ letter appears to suggest that Strauss was appointed Associate Director of the Sports Medicine Division in July 1980. However, the University records the Investigative Team identified suggest that Strauss was not recommended for that appointment until October 15, 1980. Letter from R.R. Lanese to M.D. Keller (Oct. 15, 1980) [CTRL00000265]. Strauss’ personal records indicate he began his appointment in 1981 (without reference to month). See Curriculum Vitae of Richard H. Strauss (Jan. 1996) [RHS_000811–21].

²⁹¹ Letter from Doris I. Charles to David E. Henderson (Oct. 14, 1982) [CTRL_HC00024437].

Department, University Health Service and the Department of Preventive Medicine,” to “avoid duplication of services” in “these difficult financial times.”²⁹² Charles concluded that the Sports Medicine program at OSU was “well-structured and well-attended, with the dual objective of teaching and provision of quality medical care.”²⁹³

(d) Murphy’s Response to Henderson’s Criticisms

In a separate response to President Jennings dated October 25, 1982, Murphy also refuted Henderson’s allegations and defended the provision of health care to student-athletes at OSU.²⁹⁴ Murphy disputed Henderson’s claims regarding inadequate medical recordkeeping and indicated that all medical care provided to the student-athletes was recorded in an individual medical chart.²⁹⁵ Murphy further noted that Strauss had served as Associate Director of the Sports Medicine program in the Division of Preventive Medicine for the past two years, and clarified that, “this year, he has had a formal agreement with the Department of Athletics in which we are paying a portion of his salary for the contributions he is making, both to patient care and teaching and to medical research, in which we are actively engaged in athletics.”²⁹⁶

On November 23, 1982, President Jennings thanked Murphy for his response to Henderson’s letter, and indicated that he had found Charles’ response to Henderson’s allegations “completely satisfactory” and “consider[ed] the matter closed.”²⁹⁷

The Investigative Team found no further relevant records concerning the 1982 report on the Sports Medicine Clinic.

(e) Investigative Interviews with Henderson and Charles

The Investigative Team conducted interviews with Henderson and Charles to determine whether Henderson’s references to Strauss were based on any concerns regarding sexual misconduct.²⁹⁸

After the Investigative Team read Henderson the contents of the relevant records, Henderson indicated that none of his comments related to any concerns about sexual misconduct by Strauss. Henderson stated that he had minimal interaction with Strauss because Henderson

²⁹² *Id.*

²⁹³ *Id.*

²⁹⁴ Letter from Robert J. Murphy to Edward H. Jennings (Oct. 25, 1982) [CTRL_HC00024437].

²⁹⁵ *Id.*

²⁹⁶ *Id.* Note that, in July 1982, the Athletics Department began funding a portion of Strauss’ College of Medicine salary (ranging from 5–10% over the years). See Ohio State Univ., Coll. of Med., Faculty Data Record & Appointments: Richard H. Strauss [CTRL00000265]; see also Ohio State Univ., Personnel Records: Richard H. Strauss [CTRL00000265].

²⁹⁷ Letter from Edward H. Jennings to Robert J. Murphy (Nov. 23, 1982) [CTRL_HC00024437].

²⁹⁸ We could not interview Nester or Murphy given that they are both deceased. President Jennings was unable to participate in an interview due to a significant health issue.

worked primarily with female athletic teams at OSU. Henderson did not specifically remember drafting the 1981/1982 Sports Medicine Clinic report; however, he did recall harboring concerns about the state of the Sports Medicine program at OSU and that he was generally dissatisfied with Charles' leadership as Student Health Director. When asked about his remarks concerning Strauss ("[Strauss] works for no one, answers to no one, and is accountable to no one"), Henderson recalled feeling that he had not received an adequate explanation regarding Strauss' role in the Sports Medicine Clinic—such as who had hired him and what he was doing there.

The Investigative Team also interviewed Charles, who is now in her 90s. Charles indicated that she did not recall working with Strauss²⁹⁹ and did not recall any issues relating to Strauss from her time at the University. We described the documents and correspondence identified above to Charles, but she could not recall any details relating to them. Charles told the Investigative Team that she was never made aware of any complaints or concerns regarding sexual misconduct by Strauss during her time at OSU.

We did not separately receive any allegations from other witnesses indicating that they reported concerns or complaints about Strauss to Henderson. However, with respect to Charles, a member of the Student Health nursing staff ("Nurse A") reported to the Investigative Team that she escalated concerns about Strauss' lack of adherence to scheduling and recordkeeping protocols with student-patients to Charles, but that Charles dismissed those concerns and took no action to address them. Nurse A also told us that she raised the same concerns to Charles' successor, Acting Student Health Director Dr. Forrest Smith, but that Smith similarly took no action to address them. We address our factual findings concerning these allegations next.

(ii) Staff Complaints about Strauss' Scheduling and Recordkeeping Practices

As noted above, in addition to indicating that Strauss appeared to be "accountable to no one" in Athletics or Student Health, Henderson's 1982 draft report also alleged that medical records for student-athletes were not being appropriately maintained by the University.³⁰⁰ Although Murphy disputed Henderson's claims regarding inadequate medical recordkeeping,³⁰¹ Charles appeared to concede the point, writing, "Dr. Henderson's presentation contained some pointes [sic] with which I agree, for example, needed improvements in record-keeping."³⁰² Charles further observed that during Henderson's "tenure in the 1981-82 year as primary physician in the Health Service's Sports Medicine clinic, a laissez-faire atmosphere prevailed. Medical record charting, if it occurred at all, was minimal."³⁰³

²⁹⁹ We located an undated University Health Service "Position Description" identifying Strauss as the "incumbent" physician for Sports Medicine with supervision by Doris I. Charles. See Ohio State Univ., Position Description: Richard Strauss [CTRL_HC_00007784].

³⁰⁰ Letter from David E. Henderson to Edward H. Jennings (Sept. 30, 1982) [CTRL_HC00024437].

³⁰¹ See Letter from Robert J. Murphy to Edward H. Jennings (Oct. 25, 1982) [CTRL_HC00024437].

³⁰² Letter from Doris I. Charles to William Nester (Oct. 1, 1982) [CTRL_HC_00000614].

³⁰³ *Id.*

Charles' remarks concerning the inadequate medical recordkeeping in the Sports Medicine Clinic appeared to be primarily directed at Henderson. However, as described further below, the Investigative Team received reports from Student Health nursing staff that Strauss would bring student-patients to the Student Health Center without notice and that Strauss did not comply with normal medical recordkeeping practices with respect to those students.

(a) Nurse A's Reports to Charles and Smith

Student Health Nurse A reported to the Investigative Team that, beginning in the late 1980s, she and other members of the Student Health nursing staff observed that Strauss would often show up to the Student Health Center with male students and request access to an examination room.³⁰⁴ Occasionally, Strauss would arrive first and the student would go directly in to meet Strauss, without stopping to check in with Student Health Center staff. Nurse A explained that Strauss did not provide Student Health staff with information such as the student-patient's name, medical history, or other documentation relating to the appointment. Nurse A stated that Strauss would arrive "with no appointments, no names, no nothing," and that the student-patients he brought with him were assumed to be student-athletes (primarily male cheerleaders and gymnasts).

Nurse A recalled that Strauss' examinations with the male student-patients were "longer than normal." She indicated that typical appointments with other physicians lasted "around 15 minutes," but that Strauss' appointments "almost always" took longer than 15 minutes, and on average, "probably lasted closer to half an hour." According to Nurse A, Student Health staff would comment or gossip about "Strauss' special patients" and speculated among themselves that Strauss was either treating the male student-patients for STDs or that Strauss was engaged in "sexual interaction" with the male student-patients. However, despite their suspicions, Nurse A indicated that she never witnessed Strauss perform exams on his patients, and that she was unaware of other nurses who had witnessed Strauss' exams. Nurse A also stated that she was never aware of any complaints brought by students against Strauss.

Nevertheless, Nurse A stated that she reported her concerns about Strauss' lack of adherence to normal scheduling protocols and recordkeeping to two Student Health Directors—first to Charles, and later to Charles' successor, Dr. Forrest Smith (who was then Acting Director). Specifically, in the late 1980s, Nurse A told Charles that Strauss would bring students in without scheduling any appointments and would not create any records from the visit. She also told Charles that Strauss took longer than normal to conduct his examinations with student-patients. Nurse A told the Investigative Team that Charles was dismissive of her concerns and remarked that Strauss was "part of Athletics" and "just uses the space" at Student Health.

³⁰⁴ Consistent with our discussion of Strauss' role at Student Health prior to his formal appointment there in 1994 (above, Section IV.C), Nurse A recalled that Strauss was not "on staff" at Student Health but that he would "show up" with student-athletes at times.

According to Nurse A, she also raised the same concerns regarding Strauss' poor recordkeeping to Smith, at some point between 1990 and 1992. Nurse A said that Smith "acted similarly" to Charles and appeared dismissive of Nurse A's concerns.

In our interview with Charles, the Investigative Team asked whether she recalled receiving reports from Student Health nursing staff about Strauss' failure to keep adequate or accurate records of his patient visits at Student Health, but Charles indicated that she did not. As noted above, however, Charles—who is in her 90s—generally did not recall working with Strauss at all.

As we noted above, we also requested an interview with Smith, but Smith's counsel informed us that Smith was "not interested in speaking" with the Investigative Team. We explained we had reason to believe that Smith received reports concerning Strauss, but Smith's counsel informed us that Smith would not be "voluntarily" cooperating with the Independent Investigation.

(b) Other Related Observations from Student Health Staff

Another Student Health nurse ("Nurse B") told the Investigative Team that Strauss would arrive "unannounced" at Student Health to treat patients. Nurse B recalled that she and other nurses would have to quickly "scurry" to find a space for Strauss to treat the students, given that they were not scheduled for appointments. Nurse B did not recall any issues concerning Strauss' recordkeeping practices but she noted that, in the 1990s, she was serving as an "intake" or "scheduling" nurse so she might not have been aware of such an issue.

Nurse B indicated that she did not recall receiving any student complaints about Strauss, but she did recall that a male Student Health patient care technician ("Care Tech A") was assigned to "chaperone" Strauss during his exams at some point in the 1990s. The Investigative Team was separately contacted by Care Tech A and we address the information he provided to us further below.

Lastly, we interviewed a Student Health records administrator who recalled only vaguely that nursing staff raised concerns about Strauss' lack of adherence to scheduling and recordkeeping protocols, but surmised that such complaints were more likely to be raised with the Student Health Directors than to her.

(iii) Other Evidence of Complaints Escalated to Smith

We did not receive additional allegations from Investigation witnesses pertaining to Smith's knowledge of complaints about Strauss. However, we identified contemporaneous documentary evidence indicating that, after Strauss was placed on administrative leave from Student Health and Athletics in January 1996, it was claimed that Smith agreed to be interviewed by Richard Lanese—a then-professor emeritus of the OSU School of Public Health (who also, as reported in Section V.E., served as a co-author/co-researcher on several of Strauss' medical studies relevant to the Independent Investigation)—concerning "complaints of a sexual nature

made by student-patients" at the Student Health Center, during Smith's service as Acting Director of Student Health.³⁰⁵

In a letter dated May 26, 1996, from Lanese to Strauss' attorney, Lanese attached a document entitled, "The Incidence of Medical Complaints at the OSU Student Health Services," which purported to address how Strauss' "record" compared "to that of all other physician's [sic] at the Student Health Services in terms of complaints of a sexual nature made by student-patients."³⁰⁶ Lanese wrote that Smith recalled "approximately six complaints of the nature studied here," and that Smith indicated that the complaints were "verifiable in the Student Health Services' Quality Assurance records."³⁰⁷ Lanese's report did not provide further information about the "approximately" six complaints referenced by Smith, such as when the complaints were brought or which physicians the complaints were brought against. It is not even clear from Lanese's report whether any of the approximately six complaints referenced by Smith were brought against Strauss.³⁰⁸

We were unable to obtain additional information concerning the reference to Smith in Lanese's May 1996 report to Strauss' attorney. We were also unable to recover records of the underlying complaints referenced in Lanese's report, despite our extensive searches at the University for materials from the Student Health Services' quality assurance files from the relevant time period of Strauss' employment at OSU.

b. Dr. Ted Grace

Grace began serving as Director of Student Health at OSU in August 1992, at which point Strauss' activities in Student Health were likely limited to the Sports Medicine Clinic. According to a June 1996 letter from Grace, Strauss began "volunteering" at the Student Health Men's Clinic "a couple of quarters" before Strauss' official part-time appointment in Student Health began on July 1, 1994.³⁰⁹

³⁰⁵ Letter from Richard R. Lanese to Tim Nagy (May 26, 1996) [CTRL_HC_00007727].

³⁰⁶ *Id.*

³⁰⁷ *Id.*

³⁰⁸ Separate contemporaneous documentary records from Grace (Smith's successor) provided no further detail about the six complaints referenced by Lanese, although Grace speculated that "there were frequent complaints" against a Student Health gynecologist (not identified by name) during Smith's tenure as Acting Director of Student Health. Additionally, Lanese reported that during Grace's tenure as Student Health Director, Strauss claimed that two complaints were brought by Student Health Men's Clinic student-patients against a "Dr. X." No further detail was provided in Lanese's report, although separate contemporaneous documentary records from Grace suggested that "Dr. X" referred to Roger Miller, another Student Health physician who had one complaint brought against him during the relevant time period. See Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645]. We were unable to interview Miller because he did not respond to numerous outreach attempts requesting an interview with the Investigative Team.

³⁰⁹ Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645].

As described below, at least³¹⁰ three complaints about Strauss were reported by student-patients of the Student Health Men's Clinic during Grace's tenure as Student Health Director, although it was not until Student C's report in January 1996 that the complaints were escalated beyond Student Health to the attention of other University administrators. In the context of the University's response to Student C's complaint against Strauss, Grace (and others, including Strauss) provided factual accounts regarding the complaints raised by Students A, B, and C. Those factual accounts are summarized below.

(i) January 3, 1995 – Complaint from Student A

The Investigative Team identified contemporaneous documentation of a complaint raised by a student patient of the Student Heath Men's Clinic ("Student A") on January 3, 1995, following the student's examination with Strauss, which had taken place the prior month.³¹¹

On December 8, 1994, Student A was examined by Strauss in the Student Health Men's Clinic.³¹² The purpose of the appointment was to be treated for genital warts. Student A expected to receive a "vinegar test" from Strauss (a vinegar solution can be used to identify genital warts), but Strauss did not administer the requested test.³¹³ Furthermore, Strauss told Student A during the examination that he should not see other doctors when being treated by Strauss, and that Student A should stop using any medication until he was seen by Strauss.³¹⁴ Strauss also insisted on "teaching" Student A how to perform a self-testicular exam during the appointment.³¹⁵ Student A refused to be treated by Strauss again, and was re-scheduled for a separate appointment with a different physician.³¹⁶

Student A's complaint was recorded by the Assistant Director of Student Health Services, Judy Brady, who indicated that she met with Strauss and Student A to receive input from Student A regarding the Men's Clinic (the date of the meeting is not specified).³¹⁷ The complaint form also indicated that Student A was scheduled to be seen by another Student Health physician in February to receive the vinegar test he had originally requested. Additionally, Student A asked Brady to provide him with background information on Strauss.³¹⁸ [REDACTED]

³¹⁰ The Investigative Team interviewed a Student Health employee who alleged that more than three students raised complaints about Strauss during Grace's tenure as Director of Student Health. However, we were unable to identify additional evidence corroborative of the employee's allegation.

³¹¹ See Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587]. Consistent with our trauma-centered methodology, the Investigative Team did not seek to individually contact Student A to request his participation in the Independent Investigation. We were not contacted by Student A during the Investigation, and instead relied on the details pertaining to his account that were contained in contemporaneous University records.

³¹² Ohio State Univ., Student Health Servs., Clinical Notes (Dec. 8, 1994) [CTRL_HC_00007663] (clinical notes taken by Richard Strauss regarding his examination of Student A).

³¹³ Ohio State Univ., Student Health Servs., Patient Comment: Student A (Jan. 3, 1995) [CTRL_HC_00007663].

³¹⁴ *Id.*

³¹⁵ *Id.*

³¹⁶ *Id.*

³¹⁷ *Id.*

³¹⁸ *Id.*; Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

REDACTED
REDACTED

¹⁹ Generally, Student A expressed concern about the “extent of the examination” he received from Strauss, indicating that it was “more than he had expected,” and it was “inappropriate for the problem he had come in for.”³²⁰

External Physician Input. From the limited detail available, the External Physicians indicated that while the vinegar test was not (and is not) the optimal method for detecting genital warts, the typical method to detect genital warts during the relevant time period was via a visual examination, which would not involve an “extensive” or unusually prolonged physical touching. The External Physicians noted that telling a patient not to see other physicians was inappropriate, but that explaining how to perform a self-testicular examination was reasonable, given the patient’s genital complaint.

(a) Strauss’ Account

In Strauss’ account of the incident with Student A, he confirmed that Student A had specifically requested an examination to detect genital warts through the use of a vinegar test.³²¹ Strauss claimed that he told Student A that he usually did not perform a vinegar test because he felt he could see small warts better without the vinegar.³²² According to Strauss, he then performed a “thorough examination” without vinegar.³²³ Strauss’ clinical notes indicate that he examined Student A’s upper body skin, inguinal lymph nodes, testicles, and penile skin.³²⁴ The notes also indicate that he found no urethral discharge.³²⁵

Strauss claimed that Student A “seemed satisfied” with the examination, and indicated that Student A only registered a complaint against him because Student A’s girlfriend’s mother insisted that Student A return to Student Health for a vinegar test.³²⁶ According to Strauss, Student A “apologized” to him for making the complaint, and explained that he had previously left the appointment satisfied because he “was not enthusiastic about getting the vinegar test.”³²⁷

We found no evidence corroborating Strauss’ claim that Student A apologized to him for making the complaint, or that Student A did not actually want the vinegar test administered.

³¹⁹ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0013-18].

³²⁰ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³²¹ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007727].

³²² *Id.*

³²³ *Id.*

³²⁴ Ohio State Univ., Student Health Servs., Clinical Notes (Dec. 8, 1994) [CTRL_HC_00007663] (clinical notes taken by Richard Strauss regarding his examination of Student A).

³²⁵ *Id.*

³²⁶ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007727].

³²⁷ *Id.*

Strauss further claimed that he told Student A he could visit another physician in Student Health for the vinegar test, if he wished.³²⁸ Strauss indicated that Student A was treated by another physician in Student Health, Dr. Roger Miller, and that Miller³²⁹ later told Strauss that Student A was “ambivalent” about getting the vinegar test.³³⁰

We found no evidence corroborating Strauss’ claim that Student A was “ambivalent” about getting the vinegar test. Further, records detailing Student A’s complaint indicate that the student insisted on being treating by another physician, not that Strauss offered the option to the student.

(b) Complaint Resolution

Strauss’ account referenced his participation in a discussion with Student A and Brady regarding the complaint.³³¹ According to Strauss, within a few days of the discussion, Brady showed Strauss a one-paragraph summary of the case resolution, which Strauss interpreted to be in his favor.³³² We were unable to locate a copy of the summary referenced by Strauss.³³³

A January 1996 report written by Grace indicated that Student A, Strauss, and Brady met in Brady’s office to discuss the issues and that “the resolution centered around the creation of a consent form for the Men’s Clinic.”³³⁴ According to Grace, the “consent form” was intended to inform the patient of the components of the examination about to be performed, to request the patient’s permission, and to give the patient the opportunity to request that a chaperone be present during the exam.³³⁵

(ii) January 6, 1995 – Complaint from Student B

On January 6, 1995, just a few days after Student A reported his complaint about Strauss, another male patient of the Student Health Men’s Clinic (“Student B”) presented a complaint about his examination with Strauss to Brady.³³⁶ There was no indication in Student B’s report that he was aware of the complaint made by Student A, or that he had any connection to Student A.³³⁷

³²⁸ *Id.*

³²⁹ Roger Miller did not respond to numerous requests from the Investigative Team to participate in an interview; consequently, we were unable to discuss this and other accounts with him.

³³⁰ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007727].

³³¹ *Id.*

³³² *Id.*

³³³ When we spoke to Brady about Student A’s complaint, she had only a vague recollection of a joint meeting between her, Student A, and Strauss.

³³⁴ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³³⁵ *Id.* We note that the “consent form” referenced does not contain the word “consent” or “chaperone.”

³³⁶ See, e.g., *id.*; Ohio State Univ., Student Health Servs., Patient Comment: Student B (Jan. 6, 1995) [CTRL_HC_00007659].

³³⁷ Student B contacted the Investigative Team to report his experience with Strauss. Student B did not participate in an interview with the Investigative Team, but communicated with the Investigative Team through his counsel.

Student B reported that he made an appointment at Student Health for an examination of a lump in his breast.³³⁸ The triage nurse at the Student Health Center recommended that Student B be examined by Strauss.³³⁹ As described by Student B, Strauss told him that the lump was nothing more than breast tissue, laughed, and told Student B that men cannot get breast cancer.³⁴⁰ Strauss then proceeded to give Student B a testicular and anal exam.³⁴¹ Student B noted he told Strauss that his own physician was monitoring his testicular health due to a previous lump.³⁴² He also noted that Strauss did not ask him if he already had a testicular exam recently.³⁴³

During the appointment, Strauss also asked Student B if he was gay and asked Student B questions about his sexual desires.³⁴⁴ Strauss asked whether Student B found it difficult sleeping with just one person, and said, “Don’t you want to do something else?”³⁴⁵ Student B reported that, at some point during the exam, Strauss had an erection and pressed up against Student B.³⁴⁶ Student B felt that, had he given Strauss a “signal [that Student B was interested in him sexually, Strauss] would have acted on it.”³⁴⁷ Student B described Strauss’ demeanor as “flirty” and “not at all appropriate.”³⁴⁸ Student B also stated that Strauss became immediately cool towards him when Student B told Strauss he was in a stable relationship with a partner.³⁴⁹

Student B reported that he was “really upset” by the experience and felt as though Strauss acted with “[a] lot of intimidation.”³⁵⁰ Student B also reported that he heard similar complaints from other students who had seen Strauss, and provided the name of one such student.³⁵¹

³³⁸ Ohio State Univ., Student Health Servs., Patient Comment: Student B (Jan. 6, 1995) [CTRL_HC_00007659].

³³⁹ *Id.*

³⁴⁰ *Id.*

³⁴¹ *Id.*

³⁴² *Id.*

³⁴³ *Id.*

³⁴⁴ *Id.*

³⁴⁵ *Id.*

³⁴⁶ *Id.*

³⁴⁷ *Id.*

³⁴⁸ *Id.*

³⁴⁹ *Id.*; Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³⁵⁰ Ohio State Univ., Student Health Servs., Patient Comment: Student B (Jan. 6, 1995) [CTRL_HC_00007659].

³⁵¹ *Id.*; Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587]. According to Grace’s January 1996 report, Grace had previously interviewed the student referenced by Student B “based on his comments in the *Lantern*,” and the student reportedly “denied accusations against physicians here at that time.” *Id.* The Investigative Team searched the archives of *The Lantern*, seeking to identify the comments referenced by Grace, but located nothing on point relative to the named student. The only potentially relevant article we located was dated May 10, 1994, and did not mention the name of the student identified by Student B. Nevertheless, the article reported that gay and lesbian students at OSU “have problems with certain doctors at the Student Health Center who discriminate against patients once they find out the student’s sexual orientation.” The examples provided were that students who went to the health center for treatment were “given a lecture about the dangers of their sexual activities,” and that “one student went to a doctor with a sore throat and was not only given numerous tests for sexually transmitted diseases, but also advised never to have sex again because he was gay.” The Investigative Team attempted to locate the students who provided the relevant quotes in the article, but did not have success in reaching them. The students

External Physician Input. The External Physicians disagreed with the notion that breast cancer does not affect the male population; while rare, men can certainly develop breast cancer. They added that performing testicular and rectal examinations on a patient presenting with a breast lump was inappropriate. The External Physicians also noted that the line of questioning regarding a patient's sexuality and sexual desires was not appropriate and not relevant for this examination.

(a) Strauss' Account

In Strauss' account of the incident with Student B, he provided little actual detail as to the substance of the medical exam itself.³⁵² He indicated only that the case involved a genital examination that revealed pubic molluscum contagiosum, "a contagious disease that the patient had not been aware of."³⁵³ Strauss acknowledged that Student B "questioned whether my examination had been appropriate."³⁵⁴ The remainder of Strauss' account related to a two-hour meeting that took place between him, Student B, Student B's relationship partner, Dr. Louise Douce (OSU's Director of Counseling and Consulting Services), and Grace, as described further below.

More generally, Strauss defended his use of "the extremely thorough method of physical examination" that he used when evaluating patients for STDs.³⁵⁵ Strauss claimed that he was trained at the University of Washington in Seattle to use methods developed by Dr. King Holmes, the school's Director of the Center for Sexually Transmitted Diseases.³⁵⁶ Strauss also cited to Holmes' textbook on STDs, which Strauss claimed to contain descriptions of Strauss' methodology for routine examinations of STDs.³⁵⁷ However, the Holmes' textbook cited by Strauss was not published until several years after Strauss had left the University of Washington, Strauss never worked with Holmes, and Holmes was still himself a physician in training at the time Strauss was at the University of Washington (he was not yet the Director of the Center for Sexually Transmitted Diseases). In his interview with the Investigative Team, Holmes confirmed that he never "trained" or mentored Strauss. In sum, Strauss' claimed association with Holmes appears to have been misleading, at best.

(b) Complaint Resolution/Internal Mediation

At some point between January 6, 1995, and January 26, 1995, a two-hour meeting was convened between Strauss, Student B, Student B's relationship partner, Douce, and Grace.³⁵⁸

who were quoted in the article were referencing the experiences of other (unnamed) students, and not their own experiences.

³⁵² Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007727].

³⁵³ *Id.*

³⁵⁴ *Id.*

³⁵⁵ *Id.*

³⁵⁶ *Id.*

³⁵⁷ *Id.*

³⁵⁸ *Id.*; Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

In a January 1996 report written by Grace about the complaints raised against Strauss in Student Health, he indicated that he asked Douce to “mediate an investigation” of Student B’s complaint, beginning with a meeting between Student B and Strauss. According to Grace, Student B brought his relationship partner to the meeting and Grace “was present as an observer.”³⁵⁹ Grace indicated that the meeting lasted two hours and that, near the end, “Strauss became upset and shouted at [Student B].”³⁶⁰ Student B stated that he did not believe Strauss’ explanation (the substance of Strauss’ explanation was not provided in the report), and stated that he needed to discuss what to do next with his partner.³⁶¹ According to Grace, Douce “made the statement that she was 90[%] confident that Dr. Strauss was not guilty of any wrong doing except being a terrible insensitive provider who asked inappropriate questions.”³⁶² Strauss later claimed that Douce stated she was “99% sure” that everything Strauss said at the mediation was truthful and that his examination was appropriate.

In Douce’s interviews with the Investigative Team, she indicated that she could not recall any details regarding her participation in the mediation, although she indicated it did not surprise her to hear that Grace might have asked her to mediate the dispute between Strauss and Student B. She recalled generally that Strauss was “an arrogant character,” and she was disturbed to hear the details of Student B’s complaint as summarized to her by the Investigative Team.

When asked about Strauss’ statement that Douce indicated she was “99%” confident that Strauss did not engage in inappropriate conduct, she stated that she would never say she is 99% sure about anything. In a separate memorandum that Grace wrote in June 1996, he indicated that after Douce learned of Student C’s complaint, she “regretted her statement of 90[%]” and suggested counseling for Strauss.³⁶³ Grace also wrote that Student B provided a “very believable report” that Strauss had “come on to him.”³⁶⁴

The Investigative Team conducted an extensive search to locate any additional records of the mediation with Student B, including a search for Douce’s files, but did not locate anything beyond the materials summarized here.

(c) Grace’s Misstatements to Student B

In Grace’s January 1996 report detailing the complaints raised against Strauss, Grace wrote that—after the mediation—Student B called him on January 24, 1995, and informed Grace that he was “willing to drop the charges” if Grace did three things: (1) that Grace “assure him we had never had a similar complaint about Dr. Strauss before”; (2) that “we maintain his complaint on file and bring it forward should any other complaint ever be brought against Dr.

³⁵⁹ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³⁶⁰ *Id.*

³⁶¹ *Id.*

³⁶² *Id.* Additionally, Douce had not been made aware of the prior complaint against Strauss by Student A. See Memorandum from Helen Ninos to David Williams (July 22, 1996) [CTRL_HC_00007572].

³⁶³ Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645].

³⁶⁴ *Id.*

Strauss;” and (3) that “we always use the patient consent form in Men’s Clinic that had been developed to let students know they have the opportunity to request a chaperone be present during the examination.”³⁶⁵

On January 26, 1995, Grace sent a letter to Student B, referencing a telephone conversation between the two on January 24, 1995, in which they discussed how to resolve Student B’s complaint about Strauss. In his letter, which copied Brady, Grace assured Student B that Student Health had never received a complaint about Strauss before, stated that Strauss had received several positive comments from patients, and noted that all patient comments—both positive and negative—were maintained in the Student Health Center’s quality assurance file.³⁶⁶

First, Student B was incorrectly told that Student Health had never received a complaint about Strauss prior to his own complaint, given that Student A reported a complaint about Strauss just days before Student B made his complaint. By the time Grace sent the above letter to Student B, several weeks had passed since Student A made his complaint to Brady.

Second, Grace’s letter represented that all patient comments were maintained in Student Health’s quality assurance file. If that were the case, then Student A’s comment should have been captured there and, presumably, the complaint would have been acknowledged in the letter to Student B. If Grace had checked the quality assurance file prior to sending the January 26th letter to Student B, and Student A’s comment was not there, then Student B was incorrectly told that all patient comments were maintained in the quality assurance file. If Student A’s comment was in the quality assurance file, then it appears that Grace made a knowing misstatement to Student B.

Third, we performed extensive searches within the University and the University Archives to locate the Student Health quality assurance files from the relevant time period, but our efforts were unsuccessful.³⁶⁷

Despite speaking with a Perkins investigator during an initial outreach call made in May 2018, Grace was later unwilling to participate in a formal interview with the Investigative Team unless the University agreed to indemnify his legal fees.³⁶⁸ Consequently, we were unable to interview Grace about the factual discrepancies contained in his letter to Student B, which we had not yet located in our document searches at the time of our initial outreach call to Grace in May 2018.

³⁶⁵ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³⁶⁶ Letter from Ted W. Grace to Student B (Jan. 26, 1995) [CTRL_HC_00007592].

³⁶⁷ The only two patient comments we were able to recover from the relevant time period were Student A’s and Student B’s, which were archived with materials relating to Strauss’ subsequent termination from Student Health in 1996.

³⁶⁸ As noted above, some former employees demanded that the University pay their attorneys’ fees and/or indemnify them before they would agree to be interviewed. University counsel informed those individuals that the University was not permitted to do so, under state law governing the indemnification of current or former employees.

Brady, however, cooperated with the Independent Investigation and participated in several interviews with the Investigative Team, per our requests.³⁶⁹ With respect to the quality assurance file, Brady stated that it was “difficult for her to believe” that she did not make Grace aware of Student A’s complaint—particularly by the time Grace sent the letter to Student B on January 26, 1995.³⁷⁰ Brady indicated that the record of Student A’s complaint should have gone into the quality assurance file, as a matter of practice. Indeed, Grace’s letter to Student B represented that “all patient comments” were maintained in the quality assurance file.³⁷¹

Brady was unsure why Grace did not reference or acknowledge Student A’s complaint in his letter to Student B, but speculated that Grace may have considered Student A’s complaint “resolved” since the patient eventually received the vinegar test he had initially requested. Brady also noted that Student A’s description of his examination with Strauss was less specific than Student B’s, but acknowledged that part of Student A’s complaint was that he was not expecting to receive a testicular exam. Brady recalled that Student A had a difficult time discussing his examination with Strauss and did not want to be interviewed about it. In hindsight, Brady expressed regret for not being more persistent in obtaining more details about Student A’s examination with Strauss.

Nevertheless, even if Grace believed that Student A’s complaint was not of a sexual nature, Grace’s January 26th letter to Student B stated unequivocally that Student Health “had never received a complaint about Dr. Strauss before,” which was not accurate.³⁷²

(d) New Patient Intake Form

Grace’s January 26, 1995 letter to Student B also stated that Student B’s “suggestions for improving [the] Men’s Clinic have been quite helpful and resulted in the development of a new patient hand-out that combines patient information about the clinic with a past medical history form. This information sheet asks every patient if he or she would like us to have a chaperone present during the office visit.”³⁷³

As discussed above, Grace’s January 1996 report indicated that the resolution of Student A’s complaint—not Student B’s complaint—centered on the creation of a “consent form” for the Men’s Clinic.³⁷⁴ It appears, then, that *externally*, Student B was told that the patient intake form

³⁶⁹ REDACTED

Ohio State Med. Bd., Report of investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0001-18].

³⁷⁰ Grace addressed the complaints from Students A, B, and C in a report he later drafted in January 1996. He did not indicate anywhere in the report that he was unaware of Student A’s complaint when he assured Student B that there had been no prior complaints against Strauss. Further, he acknowledged that the resolution of Student A’s complaint “centered around” a “consent form” that included the opportunity to request a “chaperone.” See Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³⁷¹ Letter from Ted W. Grace to Student B (Jan. 26, 1995) [CTRL_HC_00007592].

³⁷² *Id.*

³⁷³ *Id.*

³⁷⁴ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

was developed to address his concerns, while, *internally*, Student Health had already been developing an intake form to address Student A's concerns.

The Men's Clinic patient intake form that was developed in the aftermath of the January 1995 complaints read: "Sometimes a technician or medical student works with us. Do you prefer that such a person be (circle one): Present; Not Present; Don't Care."³⁷⁵ It says nothing further about a "chaperone" option, and the word "consent" appears nowhere on the form. Further, it explained that "generally" physical examinations performed in the Men's Clinic include examinations of the skin of the upper body, skin of the pubic area and genitals (including the penis and scrotum), and "feeling both testicles for lumps."³⁷⁶ It then instructed the patient to cross out anything from the list should he prefer that the area not be examined.³⁷⁷

In Grace's June 1996 memorandum regarding Strauss, he wrote that—following Student B's complaint—Strauss suggested shortening his examination "to just the affected areas of the body involved."³⁷⁸ Grace indicated that he agreed to the procedure "and assumed that [Strauss] had stopped doing the complete examination on everyone, which is not done by any of my other providers."³⁷⁹ However, if Strauss had agreed to stop administering his "complete examination" following Student B's complaint, then it is unclear why the patient intake form that was developed after Student B's complaint still contemplated Strauss performing a complete examination, subject to the patient opting-out.³⁸⁰

(iii) January 5, 1996 – Complaint from Student C

On January 5, 1996, Student C³⁸¹ went to the OSU Men's Clinic to be evaluated for a potential urinary tract infection.³⁸² Student C was seen by Strauss at 1:15 pm that afternoon.³⁸³ After asking Student C about his symptoms, Strauss told Student C to remove his baseball cap so that Strauss could see his eyes. Strauss asked Student C if he had a girlfriend and then asked him if he had been "pounding her" because "sometimes if you are pounding during sex you could get this type of infection." Student C found Strauss' language "bizarre" and inappropriate but thought that Strauss was possibly trying to use terminology he thought a college-aged male would use. Strauss then told Student C that he needed to perform a "full exam" to figure out the cause of the problem. Strauss instructed Student C to remove his shirt, commented on Student C's "fit body," and asked Student C if he worked out/lifted weights.

³⁷⁵ Ohio State Univ., Student Health Servs., The Men's Clinic Patient Intake Form [CTRL_HC_00007594].

³⁷⁶ *Id.*

³⁷⁷ *Id.*

³⁷⁸ Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645].

³⁷⁹ *Id.*; see also Memorandum from Helen Ninos to David Williams (July 22, 1996) [CTRL_HC_00007572].

³⁸⁰ Ohio State Univ., Student Health Servs., The Men's Clinic Patient Intake Form [CTRL_HC_00007594].

³⁸¹ Student C participated in an interview with the Investigative Team; he is counted among the firsthand accounts we received about Strauss' abuse.

³⁸² Ohio State Univ., Student Health Servs., Judy Brady's Student C Complaint Notes (Jan. 8, 1996) [CTRL_HC_00007657].

³⁸³ *Id.*

Strauss then told Student C to remove his pants. Strauss began by examining Student C's upper torso and then moved down to examine his genitals. Strauss began pressing and pushing on Student C's genitals, caressing and fondling his penis. Student C told Strauss he was uncomfortable and Strauss told him it was necessary to perform the examination for the type of problem Student C presented. Strauss also told Student C he was looking for genital warts.³⁸⁴ Strauss continued pressing and pushing on Student C's genitals to the point of erection and then ejaculation. Strauss walked away and said, "That's okay, that's why I wear gloves."³⁸⁵ Strauss told Student C he was a "premature ejaculator" and he could "fuck-off" what had just happened.³⁸⁶ Strauss then took two cultures from the end of Student C's penis.³⁸⁷

Strauss began to talk to Student C about his infection, and used the word "fuck" several times, such as "when you and your girlfriend are fucking," and used slang words for anatomy, such as "nuts and ass."³⁸⁸ Student C grew increasingly upset about what had just happened, told Strauss that what Strauss did was "wrong" and that Strauss "should not have done that." Strauss responded by telling Student C that "it didn't seem like it was wrong," and that "it seemed like [Student C] kind of enjoyed it."

Student C gathered his clothes and stormed out of the examination room. He felt an urgency to obtain his medical records and to destroy them because he did not want Strauss to use information from the file to find him. He also worried that Strauss would use what happened in the exam to claim that what happened was somehow consensual, given that Strauss commented that Student C "seemed to enjoy" being fondled.

Leaving the exam room at approximately 1:55 pm, Student C demanded that the Student Health receptionist give him his medical file and that she erase his records from the computer.³⁸⁹ Student C yelled to the students sitting in the waiting area that they should "not see this doctor," that Strauss was "a pervert," and that the students should "all get out of there right away." A Student Health staff member alerted Dr. Roger Miller, whose office was on the same floor as the Men's Clinic.³⁹⁰    Miller went to Strauss' office to inform him that Student C wanted his medical records; Strauss told Miller he would meet with them in Miller's office.³⁹¹ 

³⁸⁴ Ohio State Univ., Student Health Servs., Judy Brady's Student C Complaint Notes (Jan. 8, 1996) [CTRL_HC_00007657].

³⁸⁵ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³⁸⁶ *Id.*

³⁸⁷ *Id.*

³⁸⁸ *Id.*

³⁸⁹ Ohio State Univ., Student Health Servs., Judy Brady's Student C Complaint Notes (Jan. 8, 1996) [CTRL_HC_00007657].

³⁹⁰ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587]; Ohio State Med. Bd., Notes from Interview of Roger A. Miller: Complaint No. 96-0999A (Apr. 19, 1996) [SMBO_0170-73].

³⁹¹ Ohio State Med. Bd.,  Complaint No. 96-0999A (Apr. 19, 1996) [SMBO_0170-73].

³⁹² Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 19, 1996) [RHS_000545-49].

REDACTED

³⁹³ Student C then

spotted Strauss in the hallway, grabbed the medical chart from Strauss' hands, and knocked the culture specimens out of Strauss' hands to the floor. Student C then tore up his medical chart. Miller asked Student C if he would meet with the Assistant Director of Student Health Services—Judy Brady—but Student C refused and left the facility.³⁹⁴ Miller went to Brady's office to retrieve her.³⁹⁵

External Physician Input. As noted above, the External Physicians reiterated that ejaculation during any kind of examination is “highly unusual” and has never occurred in their combined experience. The External Physicians explained that there are two parts to a urinary tract infection diagnosis: (1) a patient’s history and (2) penile shaft inspection. To perform a penile shaft inspection, a physician would examine the penile shaft, looking for discharge, for no more than ten seconds. The External Physicians added that asking a patient to remove his pants and underwear was appropriate for a penile shaft examination, but asking a patient to remove his shirt was not necessary, nor were prolonged examinations of the upper torso, scrotum, and groin area. Any “caressing” or “fondling” of Student C’s penis was inappropriate, as well as the statement suggesting that Student C “enjoyed it.” Lastly, while Strauss’ question regarding the patient’s sexual activities was arguably relevant for a patient history analysis, it was inappropriately phrased (i.e., have you been “pounding her?”).

(a) Witness Accounts

Shortly after Student C left the Student Health Center, Brady, Grace, Miller and Strauss gathered in an office to discuss Student C’s outburst.³⁹⁶ Grace commented that perhaps they should file a report with OSUPD in case Student C had a history of “acting out” on campus.³⁹⁷ Strauss objected to the idea, and told Grace they should speak alone about the incident.³⁹⁸ When alone, Strauss told Grace that the patient was upset with his visit because he had gotten an erection, ejaculated, and was embarrassed about it.³⁹⁹ Grace described Strauss as “visibly shaken, and his entire body was trembling, although he had been fine in the room immediately beforehand.”⁴⁰⁰

³⁹³ Ohio State Med. Bd., **REDACTED**: Complaint No. 96-0999A (Apr. 19, 1996) [SMBO_0171].

³⁹⁴ Ohio State Univ., Student Health Servs., Judy Brady’s Student C Complaint Notes (Jan. 8, 1996) [CTRL_HC_00007657].

³⁹⁵ *Id.*

³⁹⁶ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

³⁹⁷ *Id.*

³⁹⁸ *Id.*

³⁹⁹ *Id.*

⁴⁰⁰ *Id.*

At approximately 2:15 p.m., Student C's mother called Brady to report that Strauss had fondled her son.⁴⁰¹ Brady asked the mother to have Student C call so that a report could be taken.⁴⁰² Student C called Brady at 2:55 p.m.⁴⁰³ During the phone conversation, Student C confirmed the details of the report his mother made to Brady.⁴⁰⁴ Brady asked if he would be willing to come meet with her or Grace, and Student C indicated he wanted to come in immediately to "get this off his chest."⁴⁰⁵ Student C returned and met with Brady around 3:10 p.m.⁴⁰⁶ He refused to return to the floor of the Men's Clinic, and met with Brady in an office on the first floor.⁴⁰⁷ Student C provided Brady with his account of what occurred during his appointment with Strauss, and then Brady arranged for Student C to be seen by Miller so Student C could receive an antibiotic for his infection.⁴⁰⁸ Brady told Student C she wanted him to talk with Grace about the exam with Strauss.⁴⁰⁹

On the evening of January 5, 1996, Strauss met with Grace and Brady in Grace's office.⁴¹⁰ During that meeting, Brady summarized the complaints raised by Student C.⁴¹¹ Strauss did not deny that he used the words "fuck," "nuts," and "ass" during his examination with Student C.⁴¹² Strauss also brought his typed clinical notes⁴¹³ from the exam to the meeting, which, according to Grace, described a routine exam (chief complaint, brief history, pertinent parts of the physical, probable diagnosis, and suggestion that cultures be taken) but did not mention anything about Student C getting upset or having an erection.⁴¹⁴ Grace questioned why Strauss' notes excluded that detail, and Strauss said that "he wanted to honor the patient's request to keep everything out of the chart so it would not embarrass him."⁴¹⁵ Grace told Strauss he "probably needed to write his version of the entire event down" and to give it to Grace to keep

⁴⁰¹ Ohio State Univ., Student Health Servs., Judy Brady's Student C Complaint Notes (Jan. 8, 1996) [CTRL_HC_00007657]; Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴⁰² Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴⁰³ Ohio State Univ., Student Health Servs., Judy Brady's Student C Complaint Notes (Jan. 8, 1996) [CTRL_HC_00007657].

⁴⁰⁴ *Id.*

⁴⁰⁵ *Id.*

⁴⁰⁶ *Id.*

⁴⁰⁷ *Id.*

⁴⁰⁸ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴⁰⁹ Ohio State Univ., Student Health Servs., Judy Brady's Student C Complaint Notes (Jan. 8, 1996) [CTRL_HC_00007657].

⁴¹⁰ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587]; Ohio State Med. Bd., REDACTED [REDACTED] : Complaint No. 96-0999A (Apr. 19, 1996) [SMBO_0168].

⁴¹¹ Notes written by Helen Ninos regarding meeting with Judy Brady & Marcia Barnett (July 15, 1996) [CTRL_HC_00007562].

⁴¹² Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645]; Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0015]; Notes written by Helen Ninos regarding meeting with Judy Brady & Marcia Barnett (July 15, 1996) [CTRL_HC_00007562]; Memorandum from Helen Ninos to David Williams (July 22, 1996) [CTRL_HC_00007572].

⁴¹³ The Investigative Team did not locate the referenced notes in our document searches.

⁴¹⁴ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴¹⁵ *Id.*

in a secured file.⁴¹⁶ According to Grace, Strauss responded that he wanted to keep the information himself, and he took the copy of his clinical notes with him.⁴¹⁷

The following Monday, on January 8, 1996, Student C returned to meet with Grace for approximately one hour beginning at 3 p.m.⁴¹⁸ Student C gave Grace the same information he had provided to Brady, with some additional details about the specifics of the medical exam.⁴¹⁹ Grace noted that Student C explained that he had received genital examinations from doctors before but that Strauss touched him in ways that made him feel very uncomfortable and had done things that were “totally unnecessary.”⁴²⁰ Student C explained that Strauss’ exam took an extended amount of time and that it felt more like he was being “fondled” and “caress[ed]” than examined.⁴²¹

After Student C left, Strauss met with Grace around 4:30 p.m.⁴²² Grace informed Strauss that Student C filed a complaint stating that Strauss fondled him, “had done things that didn’t need to be done,” and used unprofessional language.⁴²³ Strauss denied Student C’s account and said he performed the same “thorough” examination that he performs on everyone.⁴²⁴ Strauss denied fondling Student C and denied using the words “nuts” or “ass,” but admitted that he frequently uses the word “fuck” when talking with patients “because they can relate to their own language better.”⁴²⁵

According to Grace, Strauss suggested that, in the future, Miller or a patient care technician could serve as a chaperone during his exams.⁴²⁶ Strauss also said that it is common for males to get erections during genital examinations and “that some are bound to ejaculate.”⁴²⁷ Grace responded that he thought it was “pretty unusual” to have a patient ejaculate during an

⁴¹⁶ *Id.*

⁴¹⁷ *Id.* The issue of how Strauss recorded the incident with Student C in the medical record took on particular significance when Strauss later filed a complaint against Grace with the State Medical Board of Ohio, in which he accused Grace of directing him to fraudulently alter Student C’s medical record. This allegation is discussed at greater length in Sections VI.C. and D.

⁴¹⁸ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴¹⁹ *Id.*

⁴²⁰ *Id.*

⁴²¹ *Id.*

⁴²² *Id.*

⁴²³ *Id.*

⁴²⁴ *Id.*

⁴²⁵ *Id.*

⁴²⁶ *Id.*

⁴²⁷ *Id.*

exam. Grace also told Strauss that Student C did not think he had ejaculated,⁴²⁸ to which Strauss replied, “then maybe he didn’t.”⁴²⁹

At the end of Strauss’ meeting with Grace on January 8, 1996, Grace informed Strauss that he was being placed on administrative leave from Student Health and should leave the facility.⁴³⁰

On January 19, 1996, Strauss was informed by the Office of the Vice President of Student Affairs (“Student Affairs”) that Student C had filed a complaint about Strauss’ conduct in the January 5, 1996 appointment at Student Health.⁴³¹ Strauss was told that Student C had accused him of needlessly prolonging his examination, fondling him, and using unnecessary and unprofessional verbal communications.⁴³² Student Affairs also notified Strauss that, with the approval of the Office of Human Resources (“Human Resources”), Strauss had been placed under administrative leave from clinical duties within the University, pending the outcome of an investigation that was to be conducted by Student Affairs in cooperation with Human Resources.⁴³³ Lastly, Strauss was told that he would be notified of a hearing date at a later time.⁴³⁴

As discussed further below, Strauss mounted an aggressive defense to Student C’s complaint and the University personnel action that followed it.

(b) Strauss’ June 1996 Written Statement

With respect to Strauss’ factual account of what had transpired during Student C’s examination, Strauss provided a detailed written submission to the University on June 5, 1996. As discussed below, Strauss’ account of the incident was contradicted by witness accounts provided by Student C, as well as accounts from Grace, Brady, and Miller concerning statements made—and actions taken—by Strauss and others after the incident with Student C.

In his June 1996 account, Strauss wrote that he “always use[d] the same routine for physical examinations for sexually transmitted diseases,” and then went on to describe the examination he performed on Student C.⁴³⁵ Strauss indicated that he asked the patient to stand and remove his shirt, and then palpated the patient’s cervical lymph nodes, axillary lymph nodes,

⁴²⁸ During Student C’s meetings with Brady and Grace, Student C indicated that he was not sure if he had ejaculated or not, although Strauss told him he did. However, during Student C’s interview with the Investigative Team, he explained that Strauss did cause him to ejaculate but it was difficult for Student C to fully disclose/acknowledge that fact to others at the time of the abuse.

⁴²⁹ *Id.*

⁴³⁰ *Id.*

⁴³¹ Letter from Mary A. Daniels to Richard Strauss (Jan. 19, 1996) [CTRL_HC_00007747].

⁴³² *Id.*

⁴³³ *Id.*

⁴³⁴ *Id.*

⁴³⁵ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007681].

and areolae, in addition to visually inspecting the skin on the patient's face, chest, axillae, and back.⁴³⁶ He then instructed Student C to put his shirt back on and to stand in front of the examining table.⁴³⁷ Strauss wrote, "I sat in front of [Student C] in my chair and said, 'Pants down, please.'"⁴³⁸ Student C asked if he needed to remove his underwear as well, and Strauss told him, "[y]es."⁴³⁹

Strauss then "palpated" Student C's inguinal (groin) lymph nodes on both sides, and palpated both testes.⁴⁴⁰ He then asked Student C to lie down on the examining table.⁴⁴¹ According to Strauss, he examined Student C's pubic area and the skin of the scrotum and penis.⁴⁴² Strauss indicated that he "examined the skin of the penis, moving it so I could visualize the dorsal, ventral, and lateral sides."⁴⁴³ He then retracted the patient's foreskin and held the foreskin retracted to examine the glans and inner surface of the foreskin.⁴⁴⁴ At this point, according to Strauss, the patient started to become erect.⁴⁴⁵ Strauss claimed that he informed the patient that he was starting to get an erection and then put the patient's penis down.⁴⁴⁶ Strauss said that "immediately" thereafter, the patient ejaculated.⁴⁴⁷

According to Strauss, he informed Student C that he ejaculated and said, "Well, that's what gloves are for."⁴⁴⁸ Strauss then claimed that he asked Student C if he wanted to proceed with the urethral cultures, and that Student C indicated that he did.⁴⁴⁹ Strauss stated that he took the cultures and told the patient he could get dressed.⁴⁵⁰ As described by Strauss, when Student C was dressed and sitting in a chair near Strauss' desk, Strauss informed Student C that he believed the student had urethritis and indicated he would write a prescription.⁴⁵¹ Strauss then told Student C that the Student Health Men's Clinic treats "premature ejaculation" and "[w]hat we had here was an example of premature ejaculation."⁴⁵² According to Strauss, he asked Student C if he had a problem with premature ejaculation with his girlfriend; Student C responded "no," and Strauss dropped the subject.⁴⁵³

⁴³⁶ *Id.*

⁴³⁷ *Id.*

⁴³⁸ *Id.*

⁴³⁹ *Id.*

⁴⁴⁰ *Id.*

⁴⁴¹ *Id.*

⁴⁴² *Id.*

⁴⁴³ *Id.*

⁴⁴⁴ *Id.*

⁴⁴⁵ *Id.*

⁴⁴⁶ *Id.*

⁴⁴⁷ *Id.*

⁴⁴⁸ *Id.*

⁴⁴⁹ *Id.*

⁴⁵⁰ *Id.*

⁴⁵¹ *Id.*

⁴⁵² *Id.*

⁴⁵³ *Id.*

Strauss claimed that he next told Student C that they were finished and that he would let Student C read his medical write-up.⁴⁵⁴ Strauss wrote that Student C “looked startled and became agitated for the first time during his visit.”⁴⁵⁵ According to Strauss, Student C shouted a profanity at him, abruptly stood up, yanked the door open, and exited the room.⁴⁵⁶

Once Student C left his office, Strauss stated that he heard Student C shout something undecipherable near the receptionist.⁴⁵⁷ A few minutes later, Miller entered Strauss’ office and told him that Student C wanted to see his medical record.⁴⁵⁸ Strauss said that he picked up the patient’s records and the two urethral cultures and walked toward the hallway to Miller’s office.⁴⁵⁹ According to Strauss, he observed Student C “confronting and verbally abusing the receptionist” and demanding that she remove his records from the computer system.⁴⁶⁰ Student C saw Strauss, shouted that he wanted his medical records, and pulled the medical records out of Strauss’ hands.⁴⁶¹ Strauss stated that Student C then knocked the cultures out of Strauss’ hands to the floor, again demanded that the receptionist delete his information from the computer systems, tore up the medical records, and left the Men’s Clinic.⁴⁶²

(c) Inconsistencies in Strauss’ Factual Accounts

Strauss’ June 1996 written statement provided no further discussion of the events that took place during Student C’s examination, but went on to describe the events that followed. A number of factual inconsistencies arose in Strauss’ description of the appointment with Student C, as well as the post-exam events. Among these discrepancies is Strauss’ claim that “[a] few minutes after confronting [the receptionist] for the second time, the patient visited Dr. Miller. Dr. Miller told me that he gave the patient an antibiotic for a sexually transmitted disease based on the patient’s history.”⁴⁶³ As outlined above, Strauss’ own account of the events indicated that Student C left the Men’s Clinic immediately after his second “confrontation” with the receptionist. Student C did not see Miller “a few minutes after” the incident in the Men’s Clinic. Rather, Student C was treated by Miller more than an hour after the incident with Strauss. Further, Miller indicated that he had purposely not told Strauss he had seen Student C later in the day, per the patient’s request.⁴⁶⁴

⁴⁵⁴ *Id.*

⁴⁵⁵ *Id.*

⁴⁵⁶ *Id.*

⁴⁵⁷ *Id.*

⁴⁵⁸ *Id.*

⁴⁵⁹ *Id.*

⁴⁶⁰ *Id.*

⁴⁶¹ *Id.*

⁴⁶² *Id.*

⁴⁶³ *Id.*

⁴⁶⁴ Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645]; Ohio State Med. Bd., **REDACTED**: Complaint No. 96-0999A (Apr. 19, 1996) [SMBO_0173].

Similarly, Strauss' June 1996 written statement contains additional references to information and conversations that are incompatible with the timeline of events documented by the other witnesses. For example, Strauss suggests that Grace had personally spoken with Student C about his complaint—and that Grace had knowledge of Brady's conversation with Student C's mother—immediately after Student C left the Student Health Center; in fact, Brady did not speak with Student C's mother until approximately 20 minutes after the incident, and Grace did not speak with Student C until the following Monday, January 8, 1996.⁴⁶⁵ A factual account of the incident with Student C that was sent by Strauss to the State Medical Board of Ohio in March 1996 also contained these same inaccuracies with respect to the timeline of events.⁴⁶⁶

In some respects, Strauss' own accounts of key details changed over time. For example, Strauss' statements as to whether Student C ejaculated or not during the examination changed several times over. First, on January 5, 1996, shortly after the incident in question, Strauss told Grace that Student C ejaculated and that the cause was "premature ejaculation." Later, on January 8, 1996, Strauss told Grace that it is common for males to get erections during genital examinations and "that some are bound to ejaculate."⁴⁶⁷ When Grace told Strauss that Student C did not think he had ejaculated, Strauss replied, "then maybe he didn't."⁴⁶⁸ Finally, in Strauss' June 1996 written account, he acknowledged that Student C ejaculated and again attributed the response to "premature ejaculation."⁴⁶⁹ Strauss also wrote that the fact that Student C ejaculated "was a highly unusual event"—again, seeming to contradict his January 8th statement to Grace that some males are "bound to" ejaculate during genital exams.

Miller also noted that Strauss "change[d] his story several times."⁴⁷⁰ For example, when Miller first went to Strauss' office to inform him that Student C wanted a copy of his medical record, Strauss indicated he was surprised and that there had been "no problem" with the patient.⁴⁷¹ However, Miller reported that, after Student C's complaint was raised, Strauss changed his account and said that the student had "stormed out" of the examination room.⁴⁷²

On January 5, 1996, when meeting with Grace and Brady about the incident (Miller was also present for portions of the meeting), Strauss did not deny that he used the terms "fuck, nuts, and ass" during the exam, and explained that he used "street language to be more familiar" with the patients.⁴⁷³ Separately, Miller reported to Grace that Strauss had previously told him about

⁴⁶⁵ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007681].

⁴⁶⁶ Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 19, 1996) [RHS_000545-49].

⁴⁶⁷ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴⁶⁸ *Id.*

⁴⁶⁹ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007681].

⁴⁷⁰ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴⁷¹ Notes written by Helen Ninos regarding meeting with Roger Miller [CTRL_HC_00007536].

⁴⁷² *Id.*

⁴⁷³ *Id.*; Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645]; Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0015]; Memorandum from Helen Ninos to David Williams (July 22, 1996) [CTRL_HC_00007572]; Notes

using such “vernacular” with patients “because then they understood what he was saying.”⁴⁷⁴ During Strauss’ January 8th meeting with Grace, he admitted that he frequently used the word “fuck” when talking with student patients, but denied saying “nuts” or “ass.”⁴⁷⁵ In his June 1996 written account, Strauss denied using the words “fuck,” “nuts or “ass” during Student C’s exam.⁴⁷⁶

Strauss’ June 1996 account also stated that Student C was provided with the Men’s Clinic “permission form,” which Student C filled out and signed, prior to his examination with Strauss.⁴⁷⁷ According to Strauss, Student C destroyed the form after the exam, but Strauss claimed that Student C had consented to the full body exam, as well as indicated that he preferred to not have a technician or medical student present for the examination.⁴⁷⁸ [REDACTED]

[REDACTED]
[REDACTED]

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(iv) Other Evidence Involving Grace

Although Grace ultimately declined to participate in a formal interview with the Investigative Team, he initially spoke for 36 minutes with a member of the Investigative Team by telephone on May 14, 2018. During that call, Grace stated that—prior to his arrival to OSU in August 1992—when he was serving as medical director at San Diego State, he had heard rumors that Strauss engaged in “inappropriate sexual touching of athletes,” and noted that “wrestlers talk.” As a result, Grace said that he “came to the University suspicious” of Strauss and was “surprised” to see that Strauss was on staff at Student Health. Grace also told the Investigative Team that, at some point (no date was provided), Grace assigned a Student Health staff person “on a rolling basis” to serve as a “chaperone” for Strauss’ genital exams of students. According to Grace, Strauss appeared to change his examination technique when there was a chaperone in the room, as the chaperones reported back to Grace that Strauss did not “linger” at the genitals during the examinations they chaperoned.

(a) Supervision/Chaperoning Requirement

The Investigative Team interviewed an individual who worked as a patient care technician (“Care Tech A”) at the Student Health Center from the spring of 1994 until the fall of 1996. Care Tech A confirmed that Grace had instructed him to serve as a chaperone for Strauss in the Student Health Men’s Clinic, although he could not recall with certainty if Grace asked

written by Helen Ninos regarding meeting with Judy Brady & Marcia Barnett (July 15, 1996) [CTRL_HC_00007562].

⁴⁷⁴ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴⁷⁵ *Id.*

⁴⁷⁶ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007681].

⁴⁷⁷ *Id.*

⁴⁷⁸ *Id.*

⁴⁷⁹ Ohio State Med. Bd., [REDACTED] : Complaint No. 96-0999A (Apr. 19, 1996) [SMBO_0171].

him to serve as a chaperone for Strauss in 1994 or 1995. Care Tech A recalled that Grace stated, at the time, that if Strauss had “one more patient complaint” about his examinations, Strauss would not be working at Student Health anymore. Care Tech A also explained that the chaperone requirement was mandatory but “self-enforcing” in the sense that Strauss was supposed to call for a chaperone every time he was going to conduct a genital examination on a student in the Men’s Clinic.⁴⁸⁰ Care Tech A recalled that, in practice, Strauss would get impatient and upset about the chaperoning requirement because he disliked having to wait for Care Tech A to arrive to begin his examination. Eventually, Strauss stopped calling Care Tech A to chaperone. Care Tech A told us that Grace never checked in with him to determine whether Strauss was complying with the requirement, or to solicit Care Tech A’s views on how the examinations were proceeding.

We interviewed another patient care technician (“Care Tech B”) who worked with Strauss at the Student Health Men’s Clinic, beginning sometime around 1994. Care Tech B did not recall there being a mandatory chaperoning requirement in place for Strauss in the Men’s Clinic, and she specifically noted that—unlike other physicians—Strauss not only prohibited her from being in the examination room, he also did not allow her to stand near the examination room (outside the door), to clean the examination room after an appointment, or to check students out after their appointments with Strauss. According to Care Tech B, Strauss only permitted her to place the patient’s chart on the examination room door. Care Tech B only had a vague recollection of there being a patient intake form used in the Student Health Men’s Clinic, although she could not precisely recall when it was implemented.

Despite Grace’s informing the Investigative Team that he assigned a Student Health staff person “on a rolling basis” to serve as a “chaperone” for Strauss’ genital exams of students, and despite the confirmation we received from Care Tech A regarding the mandatory chaperoning requirement in place for Strauss, none of Grace’s contemporaneous factual accounts regarding the complaints against Strauss made any reference to the mandatory chaperoning practice he had imposed on Strauss.⁴⁸¹ We can only speculate as to why Grace omitted this detail, but we note that there was evidently no “mandatory” chaperone in place for Student C’s January 1996 appointment,⁴⁸² that Care Tech A indicated that Strauss eventually stopped calling for him to

⁴⁸⁰ As a note, in a report Strauss submitted to the University in May 1996 in response to the sexual misconduct allegations raised against him in 1996, it was indicated that “[a]ll” patient visits to the Student Health Men’s Clinic “required a genital examination.” Letter from Richard R. Lanese to Tim Nagy (May 26, 1996) [CTRL_HC_00007727].

⁴⁸¹ Grace’s June 1996 memorandum indicated only that, after Student B’s complaint, Strauss suggested “shortening his examination to just the affected areas of the body involved” and that Grace “distinctly remember[ed]” Strauss saying that “if he got another such complaint, it wouldn’t be worth working” at Student Health. According to Grace, his “answer” to Strauss “was that he didn’t have to worry about it, because if [Grace] got another [complaint], [Strauss] wouldn’t be [working at Student Health]!” Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645].

⁴⁸² At most, as described above, the Men’s Clinic patient intake form that was developed in the aftermath of the January 1995 complaints read: “Sometimes a technician or medical student works with us. Do you prefer that such a person be (circle one): Present; Not Present; Don’t Care.” It says nothing further about a “chaperone” option, and

chaperone Strauss' exams of student-patients in the Men's Clinic, and that—according to Care Tech A—Grace never followed up with Care Tech A to confirm whether Strauss was complying with the mandatory chaperoning requirement.

(b) Strauss' 1995 Performance Evaluation

Despite the two complaints brought against Strauss by Students A and B in January 1995, and despite the mandatory chaperoning requirement that Grace instituted for Strauss (likely following Student B's complaint), Strauss received nothing lower than "Exceptional" or "Excellent" ratings on his 1995 OSU Administrative & Professional Staff Performance Evaluation, which was signed by Miller on June 27, 1995, and by Grace on July 17, 1995.⁴⁸³

Strauss, in fact, later raised the 1995 Performance Evaluation in his own defense, to which Grace responded that "for legal reasons" a "serious allegation against a physician" would never be mentioned on an evaluation form "which is a permanent part of their personnel record."⁴⁸⁴ Grace also maintained that "[t]here were no lies on the evaluation," in that "Dr. Strauss is a highly competent, dependable, knowledgeable, and thorough clinician."⁴⁸⁵ Finally, Grace argued that "the most serious complaint" against Strauss "occurred after the [1995] evaluation."⁴⁸⁶ However, at the same time, Grace remarked that the January 1995 complaint from Student B was "a very believable report" that Strauss had "come on" to a student-patient during the student's medical examination with Strauss, and that Grace had effectively warned Strauss afterwards that he would no longer be working at Student Health if "another such complaint" was raised.⁴⁸⁷ Additionally, despite Grace having personally observed Strauss become "upset" and "shout" at Student B during Student B's January 1995 "mediation" session with Douce,⁴⁸⁸ Strauss was rated "Excellent" in the category of "Cooperation with Others/Communication Skills," which explicitly called upon the rater to evaluate the staff member's "ability to accept and evaluate suggestions from others and to resolve disagreements in a professional manner."⁴⁸⁹

Given Grace's statements to the Investigative Team about the rumors he had heard about Strauss prior to arriving at OSU, it is unclear why Grace did not escalate the January 1995 complaints from Students A and B beyond Student Health for further investigation at that time, or why there was no indication whatsoever of any potential performance concerns in Strauss

it clearly does not mandate the presence of a chaperone. Ohio State Univ., Student Health Services' Men's Clinic: Richard Strauss' Patient Intake Form (Jan. 16, 1995) [CTRL_HC_00007663].

⁴⁸³ Ohio State Univ., Student Health Servs., Administrative & Professional Staff Performance Evaluation: Richard H. Strauss (June 27, 1995) [CTRL_HC_00007803–04].

⁴⁸⁴ Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645].

⁴⁸⁵ *Id.*

⁴⁸⁶ *Id.*

⁴⁸⁷ *Id.*

⁴⁸⁸ Memorandum from Ted W. Grace (Jan. 10, 1996) [CTRL_HC_00007587].

⁴⁸⁹ Ohio State Univ., Student Health Servs., Administrative & Professional Staff Performance Evaluation: Richard H. Strauss (June 27, 1995) [CTRL_HC_00007803–04].

1995 Performance Evaluation. Further, Grace began serving as Student Health Director at OSU in 1992; according to Grace, Strauss began “volunteering” at the Student Health Men’s Clinic in or around late 1993/early 1994, and was officially appointed in July 1994.⁴⁹⁰ It is unclear why Grace agreed to allow Strauss to staff the Student Health Men’s Clinic if he knew that Strauss was rumored to have engaged in “inappropriate sexual touching of athletes.” Finally, it is unclear why Grace believed that a “self-enforcing” chaperoning requirement was an appropriate solution for Strauss, given that virtually every examination in the Men’s Clinic was likely to require a genital examination, due to the nature of the services offered there.

Because Grace declined to participate in a full interview with the Investigative Team, we were unable to ask him these questions.

C. University Administration Outside of Athletics and Student Health

As established above, there is no evidence that any reports or complaints concerning Strauss’ sexual misconduct were elevated to the attention of University administrators outside the Athletics Department and Student Health, prior to January 1996. However, in the days following Student C’s initiation of a complaint against Strauss, Student Affairs began an investigation that ultimately resulted in Strauss’ removal as a treating physician at OSU in August 1996, as summarized below.

1. Overview of Student Affairs Disciplinary Action Against Strauss

On January 8, 1996, Grace met with Strauss to inform him that he was under indefinite clinical suspension and should leave the Student Health Center facility. On January 19, 1996, Strauss was notified by the Office of the Vice President of Student Affairs that Student C had filed a complaint about Strauss’ conduct in the January 5, 1996 appointment at Student Health.⁴⁹¹ Strauss was told that Student C had accused Strauss of needlessly prolonging his examination, fondling him, and using unnecessary and unprofessional verbal communications.⁴⁹² Student Affairs also notified Strauss that, with the approval of Human Resources, Strauss had been placed under administrative leave from clinical duties within the University, pending the outcome of an investigation that was to be conducted by Student Affairs in cooperation with Human Resources.⁴⁹³ Lastly, Strauss was told that he would be notified of a hearing date at a later time.⁴⁹⁴ Although not explicitly referenced in the January 1996 notification letter to Strauss, other contemporaneous documentary evidence reflected that Strauss was simultaneously placed on administrative leave from both Student Health and Athletics.⁴⁹⁵

⁴⁹⁰ Memorandum from Ted W. Grace to David Williams & Helen Ninos (June 27, 1996) [CTRL_HC_00007645].

⁴⁹¹ Letter from Mary A. Daniels to Richard Strauss (Jan. 19, 1996) [CTRL_HC_00007747].

⁴⁹² *Id.*

⁴⁹³ *Id.*

⁴⁹⁴ *Id.*

⁴⁹⁵ Letter from Timothy P. Nagy to Richard Sisson (Mar. 1, 1996) [CTRL_HC_00007747] (“Dr. Strauss practiced at the Men’s Clinic in the Student Health Services Department, and at the Athletic Department until his suspension by David Williams on January 8, 1996.”); Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 19, 1996)

The Student Affairs Investigation was conducted by the University's Vice President of Student Affairs, David Williams, together with the Associate General Counsel for Human Resources, Helen Ninos.

On March 13, 1996, Ninos informed Strauss that the University was "considering non-renewal" of Strauss' 20% appointment with Student Health Services due to the fact that the University had "received at least three (3) complaints regarding" Strauss' "behavior during the course of medical examinations within one year."⁴⁹⁶ Ninos' letter also referenced "complaints from one athletic team" that led Strauss "to step down as the team physician," and noted that "the action taken by [Strauss] regarding the athletic team was taken in conjunction with discussions between [Strauss] and Dr. John Lombardo."⁴⁹⁷ Ninos informed Strauss that he would be given the opportunity "to be heard regarding these complaints and the pattern of complaints" in a "discussion" with Williams that was (originally) scheduled to take place on March 28, 1996, in Williams' office.⁴⁹⁸ Ninos' letter provided that the meeting with Williams was not to be "an adversarial hearing" but rather "an opportunity for [Strauss] to be heard" regarding the complaints.⁴⁹⁹

Due to scheduling delays caused by negotiations with Strauss' attorney, the "non-adversarial" hearing with Williams did not occur until June 5, 1996.⁵⁰⁰ As determined by the University, the only participants in the June 5th Student Affairs hearing were Strauss, Strauss' attorney, Williams, and Ninos. Strauss submitted written materials as part of the hearing, and his factual accounts from those materials have been cited throughout this Report.

In late July 1996, several weeks after the Student Affairs hearing, Lombardo prepared letters notifying Strauss (and Strauss' faculty departmental chair at the School of Public Health, Randall Harris) that the OSU Athletics Department would no longer be utilizing Strauss' services, effective immediately.⁵⁰¹ On July 31, 1996, Strauss' lawyer wrote a letter to Ninos in which he characterized the June 5th Student Affairs hearing as "a sham," and suggested that "the University had no intention of proceeding in good faith to resolve the matter."⁵⁰² On August 5, 1996, Williams informed Strauss that he had considered all of the information provided by

[RHS_000549] (Strauss' stating that David Williams had "suspended my clinical privileges at the Men's Clinic and as Team Physician for the Athletic Department, and placed me on paid administrative leave.").

⁴⁹⁶ Letter from Helen M. Ninos to Richard Strauss (Mar. 13, 1996) [CTRL_HC_00007549].

⁴⁹⁷ *Id.* Although not identified explicitly in Ninos' letter, the "three complaints" referenced were Students A, B, and C, and the "athletic team" referenced was the fencing team.

⁴⁹⁸ *Id.*

⁴⁹⁹ *Id.*

⁵⁰⁰ See, e.g., Letter from Helen M. Ninos to Timothy Nagy (Apr. 24, 1996) [CTRL_HC_00007611] (Ninos' stating, "The University has suggested multiple dates for Dr. Strauss and yourself to meet with Vice President Williams to discuss the complaints, and thus far you have not indicated your availability for such a meeting."); Letter from Timothy P. Nagy to Helen M. Ninos (Apr. 30, 1996) [CTRL_HC_00007606]; Letter from Timothy P. Nagy to Helen M. Ninos (May 21, 1996) [CTRL_HC_00007600].

⁵⁰¹ Letter from John A. Lombardo to Richard Strauss (July 22, 1996) [CTRL_HC_00007555].

⁵⁰² Letter from Timothy P. Nagy to Helen M. Ninos (July 31, 1996) [CTRL_HC_00007527].

Strauss and others, and that Williams had determined that Strauss' appointment with Student Health would not be renewed, effective immediately.⁵⁰³ Strauss remained employed at the University as a tenured professor in the School of Public Health.

However, even after Strauss' removal from Student Health and Athletics, Strauss continued to appeal to various University officials—up to and including the Office of the President—to reinstate him as a University physician. Finally, in October 1997, Strauss was told that the University would do nothing further regarding his case. Shortly thereafter, Strauss retired from his faculty position at the University (effective March 1, 1998), and relocated to Los Angeles, California.

2. Strauss' Defense Efforts

Upon being placed on administrative leave in January 1996, Strauss retained an attorney and undertook an aggressive effort to convince Student C to retract his complaint against Strauss. On February 29, 1996, Strauss' attorney wrote a letter directly to Student C that was delivered to the student's campus dormitory. Strauss' letter reiterated his position that Student C's exam was "necessary and extensive" due to the nature of the preliminary diagnosis.⁵⁰⁴ Strauss stated that Student C's "emotional and physical reaction to [the] exam" were "not grounds to claim that the exam was needlessly prolonged." Going further, Strauss accused Student C of demanding that Grace instruct Strauss to "create a false medical record" that Student C refused medical treatment.⁵⁰⁵ Strauss' letter accused Student C of "assault[ing]" both Strauss and the receptionist at Student Health when Student C demanded the return and destruction of his medical records.⁵⁰⁶

The February 29th letter advised that if Student C did not correct the record of his complaint with OSU, then Strauss would file a complaint with the State Medical Board alleging that Grace had instructed Strauss to falsify Student C's medical records. The letter cautioned that "[t]his action may result in a public hearing before the State Medical Licensing Board to determine the facts. If that happens, we will subpoena you as a material witness."⁵⁰⁷

On March 1, 1996, Strauss' attorney sent a letter to the Provost and Senior Vice President for Academic Affairs, Dr. Richard Sisson, in which he denied Student C's allegations and repeated the allegation that Grace instructed Strauss to create a false medical record for Student C.⁵⁰⁸ Notably, the March 1st letter to the Provost identified Student C by name and attached the February 29th letter that was sent to Student C.⁵⁰⁹ The March 1st letter to Sisson further alleged that Strauss' administrative leave "interfere[d] with Dr. Strauss' teaching responsibilities and

⁵⁰³ Letter from David Williams to Richard H. Strauss (Aug. 5, 1996) [CTRL_HC_00007547].

⁵⁰⁴ Letter from Timothy P. Nagy to Student C (Feb. 29, 1996) [CTRL_HC_00007747].

⁵⁰⁵ *Id.*

⁵⁰⁶ *Id.*

⁵⁰⁷ *Id.*

⁵⁰⁸ *Id.*

⁵⁰⁹ *Id.*

place[d] an unlawful restraint on [Strauss'] academic freedom.”⁵¹⁰ Accordingly, the letter asked Sisson to convene an “official University investigation” of the matter, and that “a panel be appointed” of “qualified” physician adjudicators.⁵¹¹ Finally, the letter alleged that “rumor and innuendo about Dr. Strauss” were “running rampant” at OSU and at “university communities across the country” given Strauss’ status as “a nationally-recognized [sic] figure in sports medicine.”⁵¹²

On March 13, 1996, Ninos sent a letter to Strauss’ attorney in which she addressed the “misrepresentations, inaccurate statements of fact [and] revelations of medical information of a patient” included in Strauss’ letters to Sisson and Student C.⁵¹³ Ninos criticized Strauss for sending a letter directly to Student C, “a young student,” and for using “the implied threat of legal action” against the student and his family.⁵¹⁴ She also admonished Strauss for disregarding Student C’s privacy by “revealing a preliminary diagnosis” of the student in Strauss’ March 1, 1996 letter to Sisson.⁵¹⁵ Ninos noted that a total of three complaints had been filed with Student Health Services against Strauss and contrasted the number of complaints against the fact that Strauss “only works 8 hours a week in the clinic.”⁵¹⁶ She denied Strauss’ claim that Grace had ordered him to falsify Student C’s medical record. She also denied Strauss’ request for an investigation by a “qualified” panel, noting that University rules did not provide for such a supplemental investigation. Finally, Ninos offered Strauss an opportunity to present his position regarding these complaints as part of a non-adversarial hearing with an administrator from Student Affairs (Williams).⁵¹⁷

3. 1996 Investigation by Student Affairs

The Student Affairs Investigation identified the complaints brought by Students A, B, and C in Student Health, as well as the 1994 complaint from the fencing team that was handled by John Lombardo in Athletics. In investigating this “pattern” of complaints against Strauss, Williams and Ninos obtained factual accounts from a small number of University witnesses from Student Health and Athletics—including Grace, Lombardo, and Strauss himself—although they did not interview (or appear to attempt to interview) any students who had complained about Strauss. And although Ninos received a copy of Lombardo’s November 1994 letter regarding the fencing team complaint, Ninos did not interview the head fencing coach—Charlotte Remenyik—who raised the 1994 complaint to Lombardo, or any other coaches, team physicians, or athletic trainers.

⁵¹⁰ *Id.*

⁵¹¹ *Id.*

⁵¹² *Id.*

⁵¹³ Letter from Helen M. Ninos to Timothy P. Nagy (Mar. 13, 1996) [CTRL_HC_00007745].

⁵¹⁴ *Id.*

⁵¹⁵ *Id.*

⁵¹⁶ *Id.*

⁵¹⁷ *Id.*

Both Ninos and Williams agreed to be interviewed by the Investigative Team for the Independent Investigation.⁵¹⁸ Neither Ninos or Williams recalled much detail about Strauss or the 1996 Student Affairs Investigation, although Ninos' recollection was somewhat refreshed by contemporaneous records (whereas Williams' recollection was not). Ninos explained that they did not seek to interview the students who had previously complained about Strauss given that she felt that she had a solid understanding of the complaints the students had raised from the relevant documentation (including contemporaneous accounts from Grace, Judy Brady, and Miller who affirmed the credibility of the students' accounts). Ninos also indicated that she was cognizant of the fact that Strauss had taken a very aggressive posture towards Student C, and was concerned that explicitly involving the other students who had complained would similarly make them targets for Strauss. Ninos further explained that once she learned that there was a pattern of complaints from students against Strauss, it did not take long to come to the conclusion that Strauss simply could not continue working in Student Health, and the rest was largely a matter of determining what process needed to be undertaken to terminate Strauss' Student Health appointment.⁵¹⁹ Ninos recalled that Lombardo was her point of contact with respect to the action taken by Athletics to address the complaints. Ninos noted that she was not authorized to conduct a specific investigation concerning the complaints that had been raised in Athletics and that the University "could be territorial" about "those kinds of things."

We also asked Williams why a separate investigation into the history of complaints about Strauss in Athletics was not undertaken at the time, given that Williams—as Vice President of Student Affairs—oversaw both Student Health and Athletics. Williams did not have any independent recollection of the events at issue but speculated that perhaps Lombardo determined that it was preferable to simply not renew Strauss' contractual agreement with Athletics rather than engage in a lengthy investigation.

4. Student Affairs Disciplinary Hearing

Leading up to the June 5, 1996, Student Affairs disciplinary hearing, Strauss' legal counsel and Ninos debated the hearing's scope over a series of back-and-forth letter correspondence.⁵²⁰ In a letter dated April 30, 1996, to Ninos, Strauss' legal counsel made a number of claims about the biased nature of the proposed hearing. Strauss also asserted that a

⁵¹⁸ The Investigative Team had the opportunity to interview Williams in August 2018. Williams passed away in February 2019.

⁵¹⁹ Correspondence between Ninos and Strauss' attorney reflected that Strauss demanded that the University provide him with a "full adjudicatory hearing on all allegations relating to the disciplinary actions taken against him by the University." Letter from Timothy P. Nagy to Helen M. Ninos (Apr. 30, 1996) [CTRL_HC_00007606]. However, the University disagreed with Strauss' interpretation of its obligations and offered only the Williams hearing. Letter from Helen M. Ninos to Timothy P. Nagy (Apr. 2, 1996) [CTRL_HC_00007815] ("No additional witnesses will be heard.").

⁵²⁰ See, e.g., Letter from Timothy P. Nagy to Helen M. Ninos (Mar. 14, 1996) [CTRL_HC_00007815]; Letter from Helen M. Ninos to Timothy P. Nagy (Apr. 2, 1996) [CTRL_HC_00007815]; Letter from Timothy P. Nagy to Helen M. Ninos (Apr. 30, 1996) [CTRL_HC_00007606]; Letter from Helen M. Ninos to Timothy P. Nagy (June 3, 1996) [CTRL_HC_00007532].

closed hearing with Williams, Ninos, Strauss, and his legal counsel—with no additional witnesses present, expert or otherwise—did not meet “due process standards” and demanded that the University provide him with a “full adjudicatory hearing on all allegations relating to the disciplinary actions taken against him by the University.”⁵²¹

On June 3, 1996, Ninos responded to Strauss’ due process demands, disagreeing with his analysis.⁵²² Maintaining that Strauss was not entitled to due process, Ninos explained that the University had afforded Strauss the essential requirements of due process nonetheless—notice and an opportunity to respond.⁵²³ Ninos wrote that Strauss had notice of the complaints against him, as he had previously met directly with Student A and Student B, and he had extensive discussions with Grace about Student C’s complaint.⁵²⁴ Ninos added that the scheduled hearing would provide Strauss an opportunity to respond to the these complaints.⁵²⁵

On June 5, 1996, the closed-session disciplinary hearing was convened in Williams’ office, with participation by Williams, Ninos, Strauss, and Strauss’ attorney.⁵²⁶ The hearing lasted approximately two hours.⁵²⁷

Strauss submitted three letters and other supporting materials to Williams in which he addressed Student C’s complaint, in great detail, and the complaints from Students A and B, in less detail.⁵²⁸ Strauss also briefly addressed the complaint from the fencing team that was raised in 1994.⁵²⁹ Strauss’ accounts regarding those incidents were summarized, above, in this Report. Ultimately, Strauss requested that he be reinstated immediately and that his contracts with Student Health Services and the Athletics Department be renewed.⁵³⁰

5. Strauss’ Removal from Athletics and Student Health

On or around July 22, 1996, Lombardo notified Strauss that the Athletics Department would no longer be utilizing his services.⁵³¹ Lombardo also sent notice to the Chair of the Department of Preventive Medicine, Dr. Randall “Randy” Harris, who was also Interim/Acting Dean of the School of Public Health, at that time.⁵³²

⁵²¹ Letter from Timothy P. Nagy to Helen M. Ninos (Apr. 30, 1996) [CTRL_HC_00007606]; *see also* Letter from Helen M. Ninos to Timothy P. Nagy (Apr. 2, 1996) [CTRL_HC_00007815] (“No additional witnesses will be heard.”).

⁵²² Letter from Helen M. Ninos to Timothy P. Nagy (June 3, 1996) [CTRL_HC_00007532].

⁵²³ *Id.*

⁵²⁴ *Id.*

⁵²⁵ *Id.*

⁵²⁶ *Id.*; *see also* Letter from David Williams to Richard H. Strauss (Aug. 5, 1996) [CTRL_HC_00007547].

⁵²⁷ Letter from David Williams to Richard H. Strauss (Aug. 5, 1996) [CTRL_HC_00007547].

⁵²⁸ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007727]; *see also* Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007681].

⁵²⁹ Letter from Richard H. Strauss to David Williams (June 3, 1996) [CTRL_HC_00007725].

⁵³⁰ Letter from Richard H. Strauss to David Williams (June 5, 1996) [CTRL_HC_00007681].

⁵³¹ Letter from John A. Lombardo to Richard Strauss (July 22, 1996) [CTRL_HC_00007555].

⁵³² *Id.*

On August 5, 1996, Williams informed Strauss that, effective immediately, his appointment with Student Health Services would not be renewed.⁵³³ In his letter to Strauss, Williams explained that the decision was “based on a total of three complaints by students in a period of 13 months.”⁵³⁴ Williams wrote that he considered all the information Strauss provided and the additional information he received from Brady, Miller, and Grace.⁵³⁵ Williams added that Strauss’ faculty appointment in the School of Public Health would continue, and he should contact Ronald St. Pierre (the Vice Dean and Secretary for the College of Medicine and Associate Vice President of Health Sciences and Academic Affairs) should he have questions about his faculty appointment.⁵³⁶

We discussed with Ninos why Strauss was permitted to retain his tenured faculty position, in the wake of multiple student complaints regarding his conduct. Ninos explained that their focus, at the time, was on removing Strauss from appointments through which he was treating patients (i.e., Student Health and Athletics), and that they understood that his faculty responsibilities involved research and writing and not any “clinical” contact with student-patients. Ninos also noted that the process for removing a tenured faculty member was extremely onerous and would have been far more difficult to navigate, in contrast to terminating (or simply not renewing) a contractual “at will” appointment. Indeed, we note that Strauss’ attorney attempted to invoke the “due process” obligations required to remove a tenured faculty member, but that the University rejected those arguments, noting specifically that the disciplinary action was unrelated to Strauss’ faculty role and thus did not implicate the “due process” rights that accompany faculty tenure.

Finally, we asked Ninos whether the University had considered referring any of the student complaints about Strauss to law enforcement. Ninos’ recollection was that the University was advised by the Ohio Attorney General’s office on the issue of referring the students’ complaints to the State Medical Board, and that her assumption was that the Medical Board would be the appropriate entity to make a criminal referral to law enforcement, depending on the outcome of the Medical Board’s investigation of Strauss.⁵³⁷

6. Strauss’ Private Off-Campus Men’s Clinic

As reported above in Section V.G., in March 1996—shortly after he had been placed on administrative leave from Student Health and Athletics—Strauss began exploring the possibility of opening a private, off-campus medical clinic that would specialize in men’s genital and urological issues.

⁵³³ Letter from David Williams to Richard H. Strauss (Aug. 5, 1996) [CTRL_HC_00007547].

⁵³⁴ *Id.*

⁵³⁵ *Id.*

⁵³⁶ *Id.*

⁵³⁷ Discussion regarding the University’s communications with the State Medical Board of Ohio is provided in Section VI.D. We were unable to determine who the University’s point of contact at the Attorney General’s Office was, at the time of the 1996 Student Affairs disciplinary action against Strauss.

a. Strauss' Discussion with St. Pierre

On July 19, 1996, while the outcome of the June 5th Student Affairs disciplinary hearing was still pending, Strauss met with Ronald St. Pierre to discuss the pending action. Strauss was told by St. Pierre that the matter would be discussed with the Vice President for Health Sciences, Dr. Manuel "Manny" Tzagournis, and that there would be no problem with Strauss engaging in part-time private medical practice and still retaining his tenure.

In the Investigative Team's interview with St. Pierre, he explained that he likely participated in the July 19th meeting with Strauss because Tzagournis was unavailable to do so. When asked why he told Strauss that there would be no problem if he maintained a private medical practice outside of the University, St. Pierre said that it was "consistent with the policies at the time," given that there were other faculty members who maintained practices outside of the University system.⁵³⁸ St. Pierre also told us that he did not know that Strauss planned to open a men's clinic, and that he would have assumed at the time that Strauss wanted to maintain a sports medicine practice. Still, St. Pierre told the Investigative Team that he was not sure whether the University "could have stopped Strauss" from opening a men's clinic, even if it wanted to do so.

In our interview with Tzagournis, however, he stated that a doctor would have needed clearance from Tzagournis himself in order to maintain a private practice, assuming that the doctor in question was a full-time faculty member. According to Tzagournis, he did not recall giving Strauss "clearance" to open his off-campus medical clinic.

b. Advertisements in *The Lantern*

Once Strauss received official notification that his appointments with Athletics and Student Health would not be renewed, he proceeded with his plans to launch his private, off-campus Men's Clinic (MCA), and began seeing patients there in September 1996. As reported, above, seven students provided firsthand accounts of abuse that occurred at MCA. Strauss also advertised for MCA in *The Lantern*, as well as several other local Columbus publications.

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⁵³⁸ In a letter from Strauss to the State Medical Board of Ohio, Strauss wrote that he was "on the 'strict full-time' medical faculty of the University" and that his "contract prohibits [him] from practicing medicine outside the University (except for national service, etc.)." Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 30, 1996) [RHS 000748-49].

⁵³⁹ REDACTED [SMBO_0010] (enclosing report of investigation).

⁵⁴⁰ *Id.*

Given that Grace was unwilling to be interviewed by the Investigative Team, and given the lack of other witness or documentary evidence regarding this issue, we were unable to determine whether any other University officials were aware that Strauss was advertising for his private men's clinic in the University's student newspaper, or whether any actions were taken by the University to stop Strauss from advertising in the student newspaper (advertisements for the clinic in *The Lantern* stopped after February 13, 1997, despite the clinic remaining incorporated until August 1998).

7. Strauss' Attempts to "Appeal" to University Administrators

As indicated above, even prior to Strauss' June 5th Student Affairs disciplinary hearing, Strauss took extensive efforts to convince various University officials that the process was "unlawful" and that he was entitled to "constitutional due process rights."⁵⁴² Strauss spoke with St. Pierre on August 3, 1996, and St. Pierre told Strauss he had discussed the matter with Tzagournis.⁵⁴³ St. Pierre called Ninos on August 4, 1996, to check on the status of Strauss' case, and on August 5, 1996, Strauss was notified by Williams that, effective immediately, his appointment with Student Health Services would not be renewed.⁵⁴⁴

Subsequently, from roughly February 1997 until October 1997, Strauss continued his efforts to appeal the decision within the University administration. For example, in late February 1997, Strauss met with William "Bill" Napier, the Executive Assistant to the University President and Secretary to the Board of Trustees, at that time. Napier confirmed to the Investigative Team that he met with Strauss on February 28, 1997, although he did not recall the nature or substance of the meeting with Strauss.

On March 17, 1997, Tzagournis sent Strauss a letter (with copy to President Gee and St. Pierre) indicating that "as [they] discussed during [their] meeting," regarding Strauss' "questions about appealing the decision previously made by the university," Strauss could send Gee a letter to request an appeal of the previous hearing.⁵⁴⁵ Subsequently, on April 3, 1997, Strauss sent a letter to President Gee, copying Tzagournis, St. Pierre, and Strauss' attorney, in which Strauss claimed that he was terminated from his position as a Student Health Services physician without "due process," citing both a lack of notice regarding the "unnecessary medical treatment" complaint filed against him and Williams' inability to pass judgment on medical matters.⁵⁴⁶

⁵⁴¹ Between September 30, 1996, and February 13, 1997, Strauss placed 33 advertisements for MCA in *The Lantern*.

⁵⁴² Letter from Timothy P. Nagy to Helen M. Ninos (Apr. 30, 1996) [CTRL_HC_00007606].

⁵⁴³ St. Pierre told the Investigative Team that he did not recall ever hearing back from Tzagournis on the issue.

⁵⁴⁴ Letter from David Williams to Richard H. Strauss (Aug. 5, 1996) [CTRL_HC_00007547].

⁵⁴⁵ Letter from Manuel Tzagournis to Richard H. Strauss (Mar. 17, 1997) [CTRL_HC_00001543].

⁵⁴⁶ Letter from Richard H. Strauss to E. Gordon Gee (Apr. 3, 1997) [CTRL_HC_00001402].

On June 6, 1997, Tzagournis⁵⁴⁷ sent a response letter to Strauss regarding Strauss' requested appeal.⁵⁴⁸ The letter stated that Strauss' case would "not be subject to any further internal review," and that "all the particulars relating to the recommendation to terminate [Strauss'] employment" were presented to Williams at the hearing Strauss had demanded.⁵⁴⁹

Strauss met, again, with Napier on June 12, 1997, and July 15, 1997, to discuss his requested appeal.⁵⁵⁰ Additionally, on July 30, 1997, Strauss sent a second letter to President Gee.⁵⁵¹ In his letter to President Gee, Strauss alleged that he had been unfairly terminated as a physician at OSU after a student-patient from the Student Health Men's Clinic complained about Strauss' treatment of the student's "two sexual medical diagnoses."⁵⁵² Strauss further alleged that the student-patient "assault[ed]" him and a "woman secretary" at Student Health, but that due to the student-patient's personal connections, Strauss had been subjected to an unfair process.⁵⁵³

President Gee spoke with the Investigative Team about the above-described correspondence to and from Strauss. While President Gee's recollection of the events involving Strauss was not refreshed by our discussion of the relevant evidence, he indicated that he was certain that Napier, Tretheway, Williams, Tzagournis, and others would have briefed him on Strauss' situation at the time, and that he "would have directed them to handle it." President Gee also indicated that he had "a lot of confidence" in Tretheway and Williams, both of whom he described as "terrific lawyers."

Despite Strauss' repeated efforts to convince the University to consider his appeal, in early October 1997, Strauss was informed by Napier that President Gee would do nothing further

⁵⁴⁷ In an email dated June 7, 1997, from the University's General Counsel, Virginia "Ginny" Trethewey, to President Gee's assistant, Tretheway indicated that she had discussed Strauss' April 3rd letter with Tzagournis and that Tretheway "prepared a response to Strauss for Manny's signature" which had been delivered to Tzagournis on June 6, 1997. Tretheway further indicated that she did "not want a response to come from the President because he ha[d] no need to be involved in this." Tretheway noted that Strauss' situation was "a continuing saga being attended to by Helen Ninos, [Tretheway], and David Williams," and remarked that "Strauss just doesn't like the outcome and is looking for a way around it." Email from Virginia Trethewey to Kate Wolford (June 7, 1997) [CTRL_HC_00001402].

⁵⁴⁸ Letter from Manuel Tzagournis to Richard H. Strauss (June 6, 1997) [RHS_000706].

⁵⁴⁹ *Id.*

⁵⁵⁰ Letter from Richard H. Strauss to E. Gordon Gee (July 30, 1997) [RHS_000701–02].

⁵⁵¹ *Id.*

⁵⁵² *Id.* In Strauss' July 30th letter to President Gee, he noted that Napier had assured him that President Gee would see the letter.

⁵⁵³ *Id.* Strauss repeatedly argued that he had been unfairly removed from Student Health, in part because of Student C's alleged "connections" at the University. We found Strauss' allegations baseless on that front. As reported above, in addition to the credibility of the complaint brought by Student C (and the lack of credibility in Strauss' account), multiple additional students had raised sexual misconduct complaints against Strauss. It was the weight of that collective evidence that resulted in Strauss' removal from Student Health (and Athletics).

on Strauss' case. Later that month, Strauss notified the Acting Director of the School of Public Health of his intention to retire from the University.⁵⁵⁴

8. Strauss' Retirement and Emeritus Appointment

On October 30, 1997, Randall Harris—the Acting Director of the School of Public Health—sent a memorandum to the Dean of the College of Medicine and Public Health, Dr. Bernadine Healy, regarding Strauss' intention to retire.⁵⁵⁵ St. Pierre was also copied on the memorandum which summarized Strauss' academic record and reputation and recommended that Strauss receive emeritus status⁵⁵⁶ upon retirement “based on his long-standing service, commitment, and national and international achievements.”⁵⁵⁷

On January 22, 1998, St. Pierre submitted a memorandum to the Vice Provost, Nancy Rudd, stating that the “Appointment, Promotion, and Tenure Advisory Committee of the department and the college recommended Strauss for an emeritus appointment,” and requesting Rudd’s support of Strauss’ emeritus appointment.⁵⁵⁸ Dean Healy was not copied on the memorandum.

Effective March 1, 1998, Strauss retired, and the Board of Trustees approved Strauss’ appointment as Faculty Emeritus in the University’s School of Public Health.⁵⁵⁹ However, on March 17, 1998, Dean Healy indicated with handwritten notes on copies of St Pierre’s January 22nd memorandum that she “had not approved” Strauss’ emeritus status and “was not told” about the recommendation until after the Board of Trustees meeting.⁵⁶⁰ Dean Healy’s notes also indicated that she would talk to Rudd and discuss the “precedent” with St. Pierre.⁵⁶¹

⁵⁵⁴ Letter from Randall E. Harris to Bernadine P. Healy (Oct. 30, 1997) [CTRL00000265] (Harris’ memorandum discussing Strauss’ retirement and his recommendation for Strauss’ emeritus status).

⁵⁵⁵ *Id.*

⁵⁵⁶ The Faculty Rules in effect as of August 11, 1997, defined “Emeritus faculty” as persons who had served the University continuously for at least ten consecutive years and who, upon retirement, were recommended by the chair, dean, and the senior vice president and provost for emeritus status. Ohio State Univ., Bylaws of the Board of Trustees, Rules of the University Faculty, Bylaws of the University Senate (Aug. 11, 1997) [CTRL_HC_00152624]. Emeritus faculty were eligible to “receive a number of privileges, such as the use of the University libraries, free parking, the option to purchase tickets to athletic events, information about University events, and attendance at classes without payment of fees.” Additionally, “[m]embers of the emeritus faculty who continue[d] to be active professionally” were “at the discretion of the college” provided “departmental facilities and services where available.” Ohio State Univ., Faculty Handbook (Oct. 1984) [CTRL_HC_00001620]. We did not identify any evidence suggesting that Strauss returned to OSU after his retirement in early 1998, nor did we find any evidence that he utilized any departmental facilities after his retirement.

⁵⁵⁷ Letter from Randall E. Harris to Bernadine P. Healy (Oct. 30, 1997) [CTRL00000265].

⁵⁵⁸ Memorandum from Ronald L. St. Pierre to Nancy Rudd (Jan. 22, 1998) [CTRL00000265].

⁵⁵⁹ Ohio State Univ., Bd. of Trs., Meeting Minutes (Mar. 6, 1998) [CTRL00002316] (approving Professor Emeritus title for Strauss on March 6, 1998, to be effective on March 1, 1998).

⁵⁶⁰ Memorandum from Ronald L. St. Pierre to Nancy Rudd (Jan. 22, 1998) [CTRL00000265].

⁵⁶¹ *Id.*

The Investigative Team interviewed Harris and St. Pierre about their recommendations that Strauss receive the emeritus appointment after he had been removed from Student Health and Athletics for sexual misconduct. We also interviewed Rudd about Strauss' emeritus appointment, but we were unable to interview Dean Healy, as she passed away in 2011.

In his interviews with the Investigative Team, Harris stated that the October 30, 1997 recommendation memorandum reflected what he knew about Strauss at the time. However, Harris also told us that, at the time he wrote the recommendation, he was aware that a student-patient at Student Health had raised a complaint about Strauss and that some kind of "hearing" had been conducted about it. We asked Harris if he factored the Student Health incident into his decision to recommend Strauss for an emeritus appointment and he stated that he "did not know how to answer the question." Harris stated further that, at the time, he had heard "through the grapevine" that Strauss had "correctly treated" the Student Health patient for a "condition" that Harris heard was an STD, and "that may have been why some people" thought Strauss had been "treated unfairly." Harris also heard that the Student Health patient who complained about Strauss "had some connection" to University officials and therefore the incident had become "a political issue" that resulted in Strauss' removal.⁵⁶² Despite having heard this from others at the time, Harris told us that he never discussed the incident, or Strauss' subsequent removal from Student Health and Athletics, with Strauss himself. Harris added that he had never asked for, or received, information about the complaint directly from Student Health or any other department—although we noted to Harris that Lombardo sent him direct notice of Strauss' removal from Athletics in late July 1996. Lastly, Harris stated that the complaint was not related to Strauss' work in the Department of Preventive Medicine, and that he "never heard any complaints" from students who took classes with Strauss.

As detailed above, and as confirmed by St. Pierre in his interviews with the Investigative Team, St. Pierre was aware of the 1996 Student Affairs disciplinary action against Strauss at the time of the emeritus recommendation in 1997. We asked St. Pierre if the disciplinary action against Strauss factored into St. Pierre's recommendation on the emeritus appointment. St. Pierre did not directly answer our question, but instead stated that "they were looking at Strauss' research, teaching, and administrative contributions." St. Pierre also suggested that an emeritus appointment was "perfunctory," and that a professor would "almost always" be put up for emeritus status unless there was an academic complaint. In Strauss' case, the complaint was not "related to his academic role."

We also asked St. Pierre about Dean Healy's handwritten notes indicating that she had "not approved" Strauss' emeritus appointment prior to it going to the Board of Trustees. St. Pierre told us that he recalled discussing the issue with Dean Healy, consistent with her handwritten note to "discuss [the] precedent" with St. Pierre. St. Pierre told us that he asked Dean Healy if she wanted to "recall" Strauss' emeritus appointment at that point, but that she

⁵⁶² The explanations Harris remembered hearing from others were strikingly similar to the narrative that Strauss was advancing at the time, as evidenced in the contemporaneous records described, above, VI.C.7.

responded, “No, it’s already done.” We asked St. Pierre if Dean Healy had not approved the emeritus appointment for Strauss due to her knowledge of the Student Health disciplinary action, but St. Pierre said that he “did not recall” and that Dean Healy’s concerns “could have been about something else, for example, Strauss’ academic qualifications.” However, the latter suggestion from St. Pierre appeared to run counter to the notion that emeritus appointment was “perfunctory.” St. Pierre indicated that he did not “independently raise” the issue of Strauss’ disciplinary action in his discussions with Dean Healy and that he did not otherwise recall that the issue “was ever raised” in his discussions with Dean Healy.

Lastly, we asked St. Pierre how it was possible for the emeritus appointment recommendation to have gone to the Board of Trustees without Dean Healy’s approval, but St. Pierre indicated that he did not know. We asked St. Pierre if—as Vice Dean of the College of Medicine and Public Health—he would have had the authority to provide the College’s approval of Strauss’ emeritus appointment. St. Pierre stated that he did not have that authority and reiterated that he did not know how it would have gone to the Provost and to the Board of Trustees without Dean Healy’s approval.

Finally, in our interview with Rudd, she generally concurred with the notion that emeritus status was “almost automatic—a rubber stamp of sorts,” but she also told us that, had she been aware of the allegations against Strauss at the time (which she was not), she would not have recommended him for emeritus status.⁵⁶³

D. State Medical Board Investigations

1. Strauss Initiated “Fraud” Complaint Against Grace

On April 2, 1996, and in the context of then-ongoing negotiations regarding the Student Affairs disciplinary process against Strauss, Ninos indicated in a letter to Strauss’ attorney that if it were ultimately determined that Strauss’ appointment in Student Health would not be renewed, then the University would “comply with the statutory directive to report the non-renewal and reasons therefore [sic] to the State Medical Board.”⁵⁶⁴

However, Strauss’ medical license with the State Medical Board of Ohio was due for renewal on May 1, 1996, and as part of that renewal, Strauss was required to indicate whether he had “any clinical privileges suspended, restricted or revoked for reasons other than failure to maintain records or attend staff meetings.”⁵⁶⁵ One week prior to submitting his application for medical license renewal, on April 19, 1996, Strauss filed a formal complaint with the State Medical Board of Ohio in which he accused Ted Grace of “directing [Strauss] to falsify a patient’s medical record” and “directing another” employee of Student Health “to destroy a

⁵⁶³ Consistent with Rudd’s recollection, we found no evidence that she was made aware of the sexual misconduct allegations or the Student Affairs disciplinary action against Strauss.

⁵⁶⁴ Letter from Helen M. Ninos to Tim Nagy (Apr. 2, 1996) [CTRL_HC_00007622].

⁵⁶⁵ State Med. Bd. of Ohio, Application for Renewal: Richard H. Strauss (Apr. 30, 1996) [RHS_000767–68].

viable culture taken from the same patient.”⁵⁶⁶ In his complaint to the Medical Board, Strauss reported that a student-patient of the Student Health Men’s Clinic had accused him of “inappropriate touching” during a “genitourinary medical” examination.⁵⁶⁷ Strauss wrote that he “denied” the student-patient’s allegations and accused the student-patient of going “to any extreme to prevent [Strauss] from recording [his] urological findings in [the student-patient’s] medical record.”⁵⁶⁸ Strauss also disclosed to the Medical Board that OSU had “suspended” him from his work at the Student Health Men’s Clinic and as a team physician for the Athletics Department.⁵⁶⁹

A week later, on April 30, 1996, Strauss applied for the renewal of his medical license with the State Medical Board of Ohio.⁵⁷⁰ As part of that renewal, Strauss reported in the affirmative that, since signing his last application for renewal, he had “clinical privileges suspended, restricted or revoked for reasons other than failure to maintain records or attend staff meetings.”⁵⁷¹ That same day, Strauss contacted the Medical Board again with an “urgent” request that the Board investigate the basis for OSU’s suspension of his clinical privileges.⁵⁷² Strauss noted that, in addition to his medical license being up for renewal in Ohio, the OSU suspension would prevent him from applying for licensure in the state of Georgia, where he wished to serve as a physician for the Summer Olympics in Atlanta.⁵⁷³

On May 17, 1996, the State Medical Board of Ohio acknowledged receipt of Strauss’ complaint regarding Grace and indicated that the information was being reviewed “for further consideration.”⁵⁷⁴

Notwithstanding Strauss’ April 19th and April 30th letters to the State Medical Board in which he flagged the matter of the ongoing OSU suspension, the Assistant Director of the Medical Board sent a letter to Strauss dated June 11, 1996, in which he noted Strauss’ affirmative response to the clinical suspension question in Strauss’ renewal application and requested that Strauss “forward a brief explanation of [his] answer, including the name and location of the hospital involved and the date of the action.”⁵⁷⁵ In response, Strauss sent a brief cover letter dated June 18, 1996, to the Assistant Director of the Medical Board indicating that “[a]s [they] discussed”—the Assistant Director should refer to Strauss’ April letters to the

⁵⁶⁶ Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 19, 1996) [RHS_000545–49].

⁵⁶⁷ *Id.*

⁵⁶⁸ *Id.*

⁵⁶⁹ *Id.*

⁵⁷⁰ State Med. Bd. of Ohio, Application for Renewal: Richard H. Strauss (Apr. 30, 1996) [RHS_000767–68].

⁵⁷¹ *Id.* [RHS_000768].

⁵⁷² Letter from Richard H. Strauss to Thomas E. Gretter (Apr. 30, 1996) [RHS_000748–49].

⁵⁷³ *Id.*

⁵⁷⁴ Letter from Sue Bigham to Richard H. Strauss (May 17, 1996) [RHS_000746].

⁵⁷⁵ Letter from John W. Rohal to Richard H. Strauss (June 11, 1996) [RHS_000736].

Medical Board.⁵⁷⁶ [REDACTED]
[REDACTED] [REDACTED]

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

⁸² But, for reasons not evident in
the records, close-out letters were not sent to Strauss [REDACTED] until mid-February 1997.⁵⁸³

⁵⁷⁶ Letter from Richard H. Strauss to John Rohal (June 18, 1996) [RHS_000735].

⁵⁷⁷ [REDACTED] [SMBO_0149].

⁵⁷⁸ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-0999A (Oct. 9, 1996) [SMBO_0132-33, SMBO_0165-66].

⁵⁷⁹ *Id.* [SMBO_0132-33]. Additionally, on June 25, 1996, Strauss sent a letter to the Medical Board investigator who interviewed him about his complaint against Grace. Letter from Richard H. Strauss to Marcia Barnett (June 25, 1996) [RHS_000732]. In the letter, Strauss referenced the fact that he provided the Medical Board investigator with copies of the two letters dated June 5, 1996, he had submitted to David Williams in connection with the Student Affairs disciplinary hearing. Letter from Richard H. Strauss to Marcia Barnett (June 25, 1996) [RHS_000732]. Strauss also enclosed a copy of his 1995 Staff Performance Evaluation from Student Health Services, and made specific note that his “Overall Evaluation” rating was “Excellent,” even though the Evaluation came “six months after the resolution of [Student A and Student B’s cases].” Letter from Richard H. Strauss to Marcia Barnett (June 25, 1996) [RHS_000732-34].

⁵⁸⁰ Ohio State Med. Bd., Report of Investigation: Complaint No. 96-0999A (Oct. 9, 1996) [SMBO_0132-33]; [REDACTED] [SMBO_0128] (enclosing report of

investigation).
⁵⁸¹ [REDACTED] [SMBO_0128] (enclosing report of investigation).

⁵⁸² [REDACTED] [SMBO_0125].

⁵⁸³ On February 11, 1997, Strauss sent a letter to Tzagournis in which he asked whether Tzagournis had “any information on the status” of Strauss’ complaint against Grace with the State Medical Board. Letter from Richard H. Strauss to Manuel Tzagournis (Feb. 11, 1997) [RHS_000538-39]. The broader context of Strauss’ letter to Tzagournis related to the fact that Grace was, at that time, being considered for faculty appointment by the

2. Medical Board Investigation of Strauss' Sexual Misconduct

As outlined above, in the context of the State Medical Board's investigation of Strauss' complaint against Grace, the Medical Board investigator learned that several complaints had been raised against Strauss concerning sexual misconduct with male students.

a. Outgrowth of Investigation from Strauss' Complaint Against Grace

On July 15, 1996, the Medical Board investigator handling Strauss' complaint against Grace met with Helen Ninos and Judy Brady regarding Strauss' allegations.⁵⁸⁴ In that meeting, Brady provided her factual account of Student C's complaint and the related aftermath (including that Strauss' original report of Student C's examination omitted important details and that there was "mutual[] agree[ment]" that Strauss' report would be amended to accurately reflect what happened).⁵⁸⁵ [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

580

⁵⁸⁶ On September 18, 1996, Ninos sent a response letter to the Medical Board in which she referenced the fact that she and Brady had met with the Medical Board investigator handling the complaint filed against Grace, and that "[d]uring the course of that questioning, the investigator indicated that the Medical Board itself might initiate an investigation of Dr. Strauss based on information discussed during the

Appointment, Promotion, and Tenure Committee of the School of Public Health—of which Strauss was a sitting member. On January 14, 1997, Strauss informed the Committee that "he had filed a formal complaint of fraud against Dr. Ted Grace with the State Medical Board of Ohio," and that—to his knowledge—the Medical Board "had not yet reached a decision" on the complaint lodged against Grace. Ohio State Univ., Sch. of Pub. Health, Appointments, Promotion, & Tenure Comm., Meeting Minutes (Jan. 14, 1997) [RHS_000539]. Accordingly, consideration of Grace's clinical appointment was "tabled until resolution of the complaint." *Id.* On February 12, 1997, the State Medical Board sent Strauss a letter informing him that, "[a]fter thorough review, the Board's Secretary and Supervising Member decided that the situation outlined" in Strauss' complaint against Grace did "not support initiation of disciplinary action under Ohio's Medical Practices Act." Letter from Sue Bigham to Richard H. Strauss (Feb. 12, 1997) [RHS_000537]. [REDACTED]

⁵⁸⁴ Notes written by Helen Ninos regarding meeting with Judy Brady & Marcia Barnett (July 15, 1996) [CTRL_HC_00007562].

⁵⁸⁵ *Id.*

⁵⁸⁶ Ohio State Med. Bd., Complaint Form: Richard H. Strauss (July 15, 1996) [SMBO_0120]. On July 25, 1996, the investigator faxed a copy of the Medical Board's "Position Paper" governing "[p]atient complaints of sexual misconduct by physicians. Fax from Marcia Barnett to Judy Brady (July 25, 1996) [CTRL_HC_00007560-61] (quoting Ohio State Med. Bd., Position Paper: Physical Examinations by Physicians (Mar. 8, 1989)).

⁵⁸⁷ [REDACTED]

[SMBO_0127].

interview.”⁵⁸⁸ Ninos indicated that Brady was “satisfied that she has been identified as having referred this complaint to” the Medical Board, and that Grace—rather than Ninos—should also be “considered to be the referring party” since it “was at Dr. Grace’s urging” that Ninos became involved in the matter.⁵⁸⁹ However, we did not identify any other records indicating that Grace was ever identified as the referring party for Strauss’ case; [REDACTED]

[REDACTED]

[REDACTED]

[590]

Accordingly, there is conflicting information as to whether the complaint against Strauss was initiated directly by the Medical Board investigator handling the complaint that Strauss filed against Grace, or whether the complaint was opened due to the “referral” from the University. Further, despite the July 31st Medical Board letter acknowledging the referral, the complaint date was elsewhere recorded as August 22 and/or August 23, 1996.

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

b. Medical Board Investigator’s Actions

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[591]

The relevant factual accounts that were obtained from the Medical Board’s investigative interviews are described above in Section VI.A.1.b.iii. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

⁵⁸⁸ Letter from Helen M. Ninos to Randy Beck (Sept. 18, 1996) [CTRL_HC_00007530].

⁵⁸⁹ *Id.*

⁵⁹⁰ See, e.g., Ohio State Med. Bd., Enforcement File: Complaint No. 96-1534(A) [SMBO_0005, SMBO_0007]; Ohio State Med. Bd., Report of Investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0013-18]; [REDACTED] [SMBO_0114].

⁵⁹¹ Ohio State Med. Bd., Enforcement File: Complaint No. 96-1534(A) [SMBO_0005]; [REDACTED] [REDACTED] [SMBO_0128] (enclosing report of investigation).

⁵⁹² See Ohio State Med. Bd., Report of investigation: Complaint No. 96-1534 A&B (Dec. 4, 1996) [SMBO_0013-19].

⁵⁹³ *Id.* [SMBO_0016, SMBO_0018].

REDACTED



c. Ambiguous Conclusion to Medical Board's Investigation

REDACTED



In Strauss' letter to President Gee dated April 3, 1997 (described above), he wrote that the State Medical Board of Ohio's "ten-month investigation [was] complete and they reported nothing to support Mr. Williams' action against" Strauss.⁵⁹⁹ Strauss urged Gee to "[a]ccept the findings of the State Medical Board of Ohio and reinstate [Strauss] as the Director of the Men's Clinic."⁶⁰⁰ Presumably in follow-up to Strauss' suggestion that the Medical Board had somehow

⁵⁹⁴ *Id.* [SMBO_0018].

⁵⁹⁵ *Id.*

⁵⁹⁶ See *id.* [SMBO_0013–18].

⁵⁹⁷ Ohio State Med. Bd., Case Review for New Assignments: Complaint No. 96-1534A (Feb. 6, 1997) [SMBO_0008].

⁵⁹⁸ *Id.*

⁵⁹⁹ Letter from Richard H. Strauss to E. Gordon Gee (Apr. 3, 1997) [RHS_000704–05].

⁶⁰⁰ *Id.* Strauss' letter was misleading in several respects, but most importantly, he appeared to be conflating the result of the complaint he filed with the Medical Board against Grace, with the result of the yet-ongoing

exonerated him. [REDACTED]

R

R

[REDACTED] 601 [REDACTED]

[REDACTED]

[REDACTED] 602 Subsequently,

in Tzagournis' response letter to Strauss (discussed above), Tzagournis indicated that "any investigations or proceedings of the State Medical Board are solely within the Board's discretion and control[.] The University's decision to terminate your part-time employment at Student Health Services was made without reference to the State Medical Board."⁶⁰³

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

We do know, however, that Strauss' medical license was never revoked by the State Medical Board of Ohio.

Although the Investigative Team requested interviews with relevant persons from the State Medical Board of Ohio, those requests were denied.

3. Medical Board Investigation of the "Failure to Report"

[REDACTED]

investigation of the sexual misconduct allegations against him (Strauss). Notably, Strauss' subsequent letter to Gee dated July 30, 1997, made no reference whatsoever to the Medical Board's investigation of the complaints raised against him. See Letter from Richard H. Strauss to E. Gordon Gee (July 30, 1997) [RHS_000701-02].

⁶⁰¹ Ohio State Med. Bd., Enforcement File: Complaint No. 96-1534(A) [SMBO_0007] (enclosing handwritten phone memorandum of call).

⁶⁰² *Id.*

⁶⁰³ Letter from Manuel Tzagournis to Richard H. Strauss (June 6, 1997) [RHS_000706].

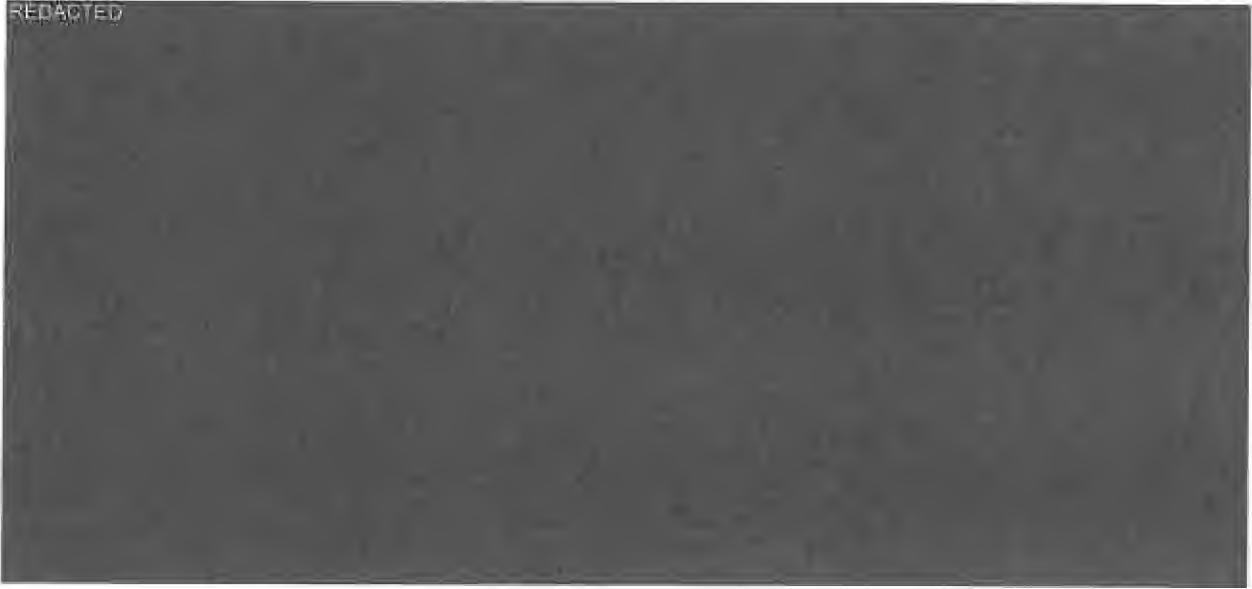
⁶⁰⁴ REDACTED [REDACTED] [SMBO_0128] (enclosing report of investigation); see also Ohio State Med. Bd., Enforcement File: Complaint No. 96-1534(A) [SMBO_0005].

⁶⁰⁵ See, e.g., Ohio State Med. Bd., Enforcement File: Complaint No. 96-1534(A) [SMBO_0005]; REDACTED [REDACTED] [SMBO_0241].

⁶⁰⁶ REDACTED [REDACTED]

[SMBO_0241].

REDACTED



VII. ADDITIONAL INVESTIGATIVE EFFORTS

A. Sexualized Environment in Larkins Hall

In addition to the Strauss-specific reports of misconduct, a significant number of witnesses reported to us that the environment in Larkins Hall was perceived to be a sexualized and, at times, predatory environment by many of the male students who frequented the facility, particularly in the men's locker room, shower room, and sauna. We received credible statements from over 50 witnesses describing pervasive voyeurism and multiple incidents of public sex acts occurring at Larkins, including statements from approximately 20 members of OSU's coaching, training, or Athletics facility staff who confirmed that they had either witnessed the voyeurism and sex acts firsthand or were otherwise aware of reports about such incidents from others, over a time span primarily ranging from the early 1980s into the late 1990s.

We also obtained information from the OSUPD relating to incidents that occurred in Larkins Hall. Although records from the relevant time period were limited, due to document retention practices, our review of OSUPD records yielded approximately 20 potentially relevant incidents occurring at Larkins between 1988 and 1998, including reports of public indecency, assault, disorderly conduct, criminal trespassing, and criminal mischief.⁶¹⁰

⁶⁰⁷ *Id.* We located no evidence concerning any continued involvement or communication between Student Health and the Medical Board during the January 1997 period or after.

⁶⁰⁸ *Id.*

⁶⁰⁹ REDACTED [SMBO_0240].

⁶¹⁰ See, e.g., Ohio State Univ., Daily Police Activity Record (Nov. 13, 1998) [CTRL00002263]; Ohio State Univ., Daily Police Activity Record (Aug. 5, 1998) [CTRL00002265]; Ohio State Univ., Daily Police Activity Record (July 15, 1998) [CTRL00002266]; Ohio State Univ., Daily Police Activity Record (May 15, 1998) [CTRL00002267]; Ohio State Univ., Daily Police Activity Record (July 26, 1997) [CTRL00002268]; Ohio State

In most cases the underlying details of the incidents taking place in Larkins were not reflected in the records, so we cannot determine with any certainty whether the reports are corroborative of voyeurism or sexual activity in the men's locker, shower, and sauna areas. However, one felony complaint of vandalism from 1988 reflected that the Assistant Director for Recreation and Intramural Sports and the Head Coach for the men's swimming team both reported sexually explicit graffiti written on the walls of the men's bathroom and the swimmer's locker room in Larkins Hall, as well as harassment in the form of obscene phone calls targeting the male swimmers.⁶¹¹ The graffiti offered oral sex to the male swimmers and included a phone number. Police records indicated that the graffiti appeared 97 different times over several months. The suspect—an adult male who was not affiliated with OSU—admitted to writing the graffiti and to placing the obscene phone calls, and was arrested and charged with vandalism. The suspect also admitted that he had previously engaged in sexual encounters at Larkins.

One part-time assistant wrestling coach indicated that he reported one aggressive voyeur to the head wrestling coach at some point between 1993 and 1998, and shortly thereafter the OSUPD conducted a “sting operation” at Larkins which resulted in the arrests of several voyeurs.⁶¹² The OSUPD records we reviewed include a log entry dated July 1993 indicating that four men unaffiliated with the University were arrested for criminal trespass at Larkins Hall,⁶¹³ however, without more detail, we cannot conclude with any certainty whether this log entry relates to the sting operation referenced by the assistant wrestling coach.

Univ., Daily Police Activity Record (June 26, 1997) [CTRL00002288]; Ohio State Univ., Daily Police Activity Record (Feb. 28, 1997) [CTRL00002269]; Ohio State Univ., Daily Police Activity Record (Nov. 11, 1996) [CTRL00002270]; Ohio State Univ., Daily Police Activity Record (Oct. 9, 1996) [CTRL00002271]; Ohio State Univ., Daily Police Activity Record (July 18, 1996) [CTRL00002272]; Ohio State Univ., Daily Police Activity Record (Feb. 1, 1996) [CTRL00002273]; Ohio State Univ., Daily Police Activity Record (Jan. 6, 1996) [CTRL00002274]; Ohio State Univ., Daily Police Activity Record (Nov. 10, 1995) [CTRL00002275]; Ohio State Univ., Daily Police Activity Record (Aug. 29, 1995) [CTRL00002279]; Ohio State Univ., Daily Police Activity Record (Mar. 8, 1995) [CTRL00002276]; Ohio State Univ., Daily Police Activity Record (Mar. 7, 1995) [CTRL00002277]; Ohio State Univ., Daily Police Activity Record (Jan. 27, 1995) [CTRL00002278]; Ohio State Univ., Daily Police Activity Record (Sept. 15, 1994) [CTRL00002280]; Ohio State Univ., Daily Police Activity Record (Aug. 26, 1994) [CTRL00002281]; Ohio State Univ., Daily Police Activity Record (May 12, 1994) [CTRL00002282]; Ohio State Univ., Daily Police Activity Record (Mar. 2, 1994) [CTRL00002283]; Ohio State Univ., Daily Police Activity Record (Sept. 30, 1993) [CTRL00002287]; Ohio State Univ., Daily Police Activity Record (July 4, 1993) [CTRL00002286]; Ohio State Univ., Daily Police Activity Record (May 3, 1993) [CTRL00002285]; Ohio State Univ., Daily Police Activity Record (Apr. 18, 1993) [CTRL00002284]; Ohio State Univ., Daily Police Activity Record (Apr. 24, 1992) [CTRL00002264].

⁶¹¹ Ohio State Univ. Police, Investigative Summary Report No. 88-2838 (Oct. 3, 1988) [CTRL00002262] (with enclosures); Ohio State Univ. Police, Police Incident Report No. 88-3127 (Nov. 1, 1988) [CTRL00002289–302] (with enclosures).

⁶¹² The assistant coach assumed that the sting operation was prompted by the head coach's escalation of the complaint to the University hierarchy. In his interview with the Investigative Team, the head coach of wrestling did not recall anything about a police sting operation at Larkins.

⁶¹³ Ohio State Univ., Daily Police Activity Record (July 4, 1993) [CTRL00002286].

1. Larkins Hall Facility

Larkins Hall was a 360,000 square foot multi-purpose recreational facility located at 337 West 17th Avenue on the OSU campus.⁶¹⁴ The original building was completed in 1932, with a major addition completed in 1977.⁶¹⁵ The facility housed programs and activities for the Physical Education and Recreation and Intramural Sports programs, as well as the Athletics Department. It contained multiple swimming pools; basketball, racquetball, handball, and squash courts; multiple gymnasiums; classrooms and laboratories; conditioning and training rooms; administrative offices; and locker room, shower, and sauna facilities.

Larkins Hall was open to the entire OSU community, including faculty, staff, students, their dependents, and registered guests.⁶¹⁶ It was also accessed at times by the general public. A number of intercollegiate athletics teams were based in Larkins, including men's and women's swimming, gymnastics, and fencing, and men's wrestling. Due to its size, accessibility, and offerings, Larkins Hall was one of the more heavily used buildings on campus. It was open 18 hours a day, seven days a week, and used by over 10,000 people daily.⁶¹⁷

By the 1990s, the physical conditions in parts of Larkins Hall, including the locker room areas, were deteriorating. On December 19, 1990, University President Gee received a letter from a faculty member who expressed a number of concerns with the deficiencies in the Larkins facility, including cleanliness, maintenance, and security of the facility (e.g., locker room thefts).⁶¹⁸ The complaint letter did not reference any issues relating to voyeurism or other sexual activities taking place in Larkins.⁶¹⁹ On January 22, 1991, in response to the complaint letter, Gee requested that the Director of the Department of University Recreation and Intramural Sports, Fred Beekman, and the Assistant Vice President of Physical Facilities, Jim Stevens, issue a report to address the concerns.⁶²⁰

On February 12, 1991, the Vice Provost for Student Affairs, Russell J. Spillman,⁶²¹ forwarded to Gee copies of the reports drafted by Beekman and Stevens regarding the concerns

⁶¹⁴ Letter from Frederic Beekman to Russell J. Spillman (Feb. 8, 1991) (enclosing reports on Larkins Hall) [CTRL_HC_00033055].

⁶¹⁵ *Buckeye Stroll: Larkins Hall*, Ohio State Univ., <https://library.osu.edu/buckeye-stroll/locations/larkins-hall> (last visited Mar. 29, 2019).

⁶¹⁶ Letter from Frederic Beekman to Russell J. Spillman (Feb. 8, 1991) [CTRL_HC_00033055] (enclosing reports on Larkins Hall).

⁶¹⁷ Letter from Russell J. Spillman to E. Gordon Gee (Feb. 26, 2019) [CTRL_HC_00033055] (enclosing draft letter from E. Gordon Gee to William D. Eldridge regarding Larkins Hall).

⁶¹⁸ Letter from William D. Eldridge to E. Gordon Gee (Dec. 19, 1990) [CTRL_HC_00033055].

⁶¹⁹ Note, however, that the letter references enclosures that the Investigative Team was unable to locate, including "letters and requests for attention to these and potential additional concerns," and a petition signed by 80 people. Letter from William D. Eldridge to E. Gordon Gee (Dec. 19, 1990) [CTRL_HC_00033055].

⁶²⁰ Letter from E. Gordon Gee to William D. Eldridge (Jan. 22, 1991) [CTRL_HC_00033055].

⁶²¹ Spillman is deceased.

raised about the conditions in Larkins Hall.⁶²² The reports acknowledged that the locker rooms were in poor physical condition and described the challenges of maintaining Larkins, particularly given its size, level of use, and its vintage.⁶²³ Nothing in the reports referenced any incidents of a sexual or voyeuristic nature.

The Investigative Team discussed the materials relating to the December 19th letter with President Gee. Gee recalled the fact that there were many complaints about the conditions in Larkins Hall, and that he himself did not think that Larkins was a facility “worthy of the University.” However, Gee had no recollection of reports or complaints regarding voyeurism or other sexual activities taking place in Larkins. Gee noted that he was not suggesting that those incidents did not occur, rather, that he simply could not recollect them, given the passage of time.

Larkins Hall was demolished in 2005 to make room for modern recreation and physical education facilities.⁶²⁴

2. Voyeurs in the Larkins Men’s Locker Room/Shower/Sauna

Approximately 30 wrestlers and gymnasts described a sexualized and voyeuristic atmosphere in the Larkins men’s locker room, showers, and sauna area. The reported incidents range from the early 1980s to the late 1990s. The student-athletes described the voyeurs as men who appeared to be college-aged, as well as older men appearing to be in their 60s, who were routinely present in the men’s locker rooms, showers, and sauna, watching the student-athletes change and shower. Some students believed that the voyeurs were other OSU students, faculty, or staff, while others indicated that they did not know whether the voyeurs were affiliated with OSU or members of the general public who were able to access the facility.

Student-athletes described “leering” and being “ogled” by the voyeurs while changing, showering, or otherwise utilizing the locker room, shower, or sauna facilities. Several witnesses reported that peepholes were routinely found in bathroom stalls or in the walls that allowed for voyeurs to surreptitiously watch the athletes shower. Students described steps they took to avoid unwanted attention, including showering in their shorts or avoiding the area entirely (e.g., not showering until they got home to their apartment or dorm room). Students also described how certain voyeurs would engage in masturbatory type of behavior while showering with the students (e.g., vigorously “soaping” their genitals), or masturbate while watching the students shower (typically from within a nearby toilet stall), as addressed further below.

Modifications to the locker rooms were made in approximately 1986 to give the student-athletes more private space, but the shower and sauna areas remained open and accessible to

⁶²² Letter from Russell J. Spillman to E. Gordon Gee (Feb. 12, 1991) [CTRL_HC_00033055] (enclosing reports on Larkins Hall).

⁶²³ *Id.*

⁶²⁴ *Larkins Hall Demolition Begins Monday*, Ohio State Univ.: OHIO STATE NEWS (July 14, 2005), <https://news.osu.edu/larkins-hall-demolition-begins-monday/>.

anyone in Larkins. At various points, the Department of Recreation posted staff to monitor who was entering the building and the locker rooms and to check for identification,⁶²⁵ but witnesses stated that this was not a consistent practice.

3. Public Sex Acts in Larkins

In addition to the acts of voyeurism, we received reports from five University employees who indicated that they personally witnessed public sex acts occurring in Larkins, and another seven employees who were aware of reports of sex acts occurring in Larkins. With respect to acts directed at the students, the reported incidents involved individuals masturbating in the bathroom stalls, showers, or sauna areas, often while staring at or surreptitiously watching the male students who were undressed. Other incidents involved individuals exposing their genitals or erections to male students.

We also received reports of a broader sexualized environment at Larkins, involving individuals who were caught having sex in bathrooms and other locations in the facility.

Head Coach A explained that he encountered men engaged in “shocking” behavior in Larkins Hall on a number of occasions, particularly in the late 1980s and early 1990s. As explained by Head Coach A, in addition to voyeurs who would time their showers to coincide with the wrestlers’, he caught men masturbating in the toilet stalls that were adjacent to the communal showers, keeping the door slightly ajar so that they could watch the wrestlers as they showered. Typically, Head Coach A would bang on the stall door and instruct the person to leave, but on one occasion, Head Coach A grabbed the man by the wrist as he tried to close the door and dragged the man out of the stall. According to Head Coach A, he held on to the man’s wrist until facility staff arrived to handle the situation. Head Coach A also described finding men engaged in sex acts in various areas of Larkins Hall, including in the wrestling room, a stairwell, and a bathroom adjacent to the wrestling room.

Four other University employees also told us that they witnessed firsthand incidents such as men engaged in sex acts in Larkins bathroom and locker room facilities, and men masturbating in the men’s sauna and shower areas.

4. Reports to University Officials

While Head Coach A repeatedly raised concerns about the adequacy and conditions of the Larkins facility with his Athletic Directors, he only recalled raising the specific issue of the sexualized environment with one Athletic Director, Andy Geiger.⁶²⁶ In his interviews with the

⁶²⁵ See Letter from Frederic Beekman to Russell J. Spillman (Feb. 8, 1991) [CTRL_HC_00033055] (enclosing reports on Larkins Hall).

⁶²⁶ Head Coach A said he was unsure if he ever raised the specific issue of the sexualized environment in Larkins to Jim Jones, and that he did not recall having any meetings with Jones to discuss the issue. Jones told the Investigative Team that he had no recollection of discussing the sexualized environment in Larkins with Head Coach A. Head Coach A was also unsure if he spoke with Rick Bay about the sexualized environment in Larkins.

Investigative Team, Geiger confirmed that, in the 1994-1996 time period, Head Coach A repeatedly raised concerns regarding the predatory environment at Larkins Hall. Geiger recalled that Head Coach A escalated complaints about voyeurism, public sexual activity, and issues with the communal showers. Geiger thought that he probably discussed the concerns with his Senior Associate Athletic Director, Paul Krebs, whom he would have tasked with follow-up. In his interview with the Investigative Team, Krebs did not recall any discussion with Geiger about this issue, although he did acknowledge hearing that students were uncomfortable with the voyeurism and sexualized environment at Larkins.

According to Geiger, he believed that the environment at Larkins was problematic and that Head Coach A was genuinely concerned about it. Geiger said that he evaluated the concerns about Larkins raised by Head Coach A and that he also elevated them to the Vice President of Student Affairs, David Williams, whose office oversaw the Athletics Department. However, in his interview with the Investigative Team, Williams did not recall any discussion with Geiger about this issue, although he did acknowledge hearing that students were uncomfortable with the voyeurism and sexualized environment at Larkins.

Geiger acknowledged that Head Coach A requested that his program be moved to another location, but stated that such a move was not logistically feasible until a new facility was constructed. Geiger also recalled meeting with two student wrestlers in approximately 1994 or 1995. According to Geiger, the students presented him with ideas on changes that could be made to the layout in Larkins to improve athlete privacy and safety.⁶²⁷ He believed that he passed on their recommendations to Student Affairs but noted that the Athletics Department did not have authority to order a redesign of the locker room or shower facilities in Larkins because the building was controlled by the Department of Recreation and Intramural Sports, and Athletics was just renting the space. Geiger indicated that his chief focus at the time was getting the fencing, gymnastics, wrestling, and swimming teams out of Larkins Hall and into an Athletics Department facility. Eventually, gymnastics, wrestling, and fencing were relocated to the Steelwood Athletic Training Facility in approximately 2002.⁶²⁸

Bay told the Investigative Team that he did not recall ever speaking with Head Coach A—or anyone else—about the sexualized environment in Larkins.

⁶²⁷ The Investigative Team also interviewed these two individuals who presented the proposals to Geiger. One explained that he scheduled two meetings with Geiger. At the first meeting, Geiger informed the student that it would not be possible to move the team out of Larkins and Geiger suggested that the student come back with other ideas. The student, along with a wrestling teammate, scheduled a follow-up meeting with Geiger in which they presented a drawing to show how the locker room could be renovated to separate the gymnasts and the wrestlers from the general population. The students also expressed their concern to Geiger that if conditions did not change, a violent altercation might take place between the student-athletes and the voyeurs. Sometime after the meeting, Geiger informed the students that the proposed changes could not be made and suggested that they shower in their dorm rooms.

⁶²⁸ Mike Shriner, *Best Swordfighters on Campus*, THE LANTERN (Oct. 23, 2002), available at <http://digital.olivesoftware.com/Olive/APA/Ohio/SharedView.Article.aspx?href=OHI%2F2002%2F10%2F23&id=A00900&sk=A766B6C5&viewMode=image>; Matthew Carroll, *New Athletic Facility Strong Enough for the Pros*, THE LANTERN (Feb. 11, 2003), available at

Head Coach A also stated that he repeatedly raised his concerns about the voyeurism presence in Larkins with the Director and Associate Director of Recreational and Intramural Sports, Fred Beekman and David Griner, respectively. In these discussions, Head Coach A suggested ideas such as reserving a 30-minute private shower time exclusively for the wrestlers, but ultimately the administrators did not take action to change the environment, citing the fact that the entire University community was entitled to utilize Larkins. The Investigative Team could not interview Beekman or Griner, as both individuals are deceased.⁶²⁹

Lastly, Head Coach A stated that he raised his concerns about voyeurism with two Associate Athletic Directors, Archie Griffin and Bill Myles. Myles did not respond to our requests for interview.⁶³⁰ In Griffin's interview with the Investigative Team, he confirmed that Head Coach A took efforts to increase the security at Larkins so that the student-athletes would not be exposed to the voyeurs. Griffin also described the difficulties of implementing changes given that the Athletics Department did not control Larkins, and indicated that the goal was to get the teams out of Larkins and into their own facility.

B. University Policies/Procedures Concerning Student Grievances and Employee Misconduct

The Investigative Team identified several University policies and procedures governing student grievances and employee misconduct that were in effect during the relevant time period. We did not perform a legal analysis to determine whether the University, or any University personnel, acted in compliance with these policies and procedures, as such an analysis was outside the scope of our fact-finding mandate.⁶³¹ However, we incorporated the policies and procedures we identified into our investigative workplan in order to ensure that we identified potential witnesses and/or documentation that may have been generated pursuant to these policies and procedures, with respect to complaints pertaining to Strauss.

The policies we identified fell into three primary categories: (i) student grievance procedures; (ii) policies governing staff at Student Health Services and University Hospitals; and (iii) employee misconduct/sexual harassment policies applicable to University faculty and staff.

<http://digital.olivesoftware.com/Olive/APA/Ohio/SharedView.Article.aspx?href=OHI%2F2003%2F02%2F11&id=Ar00803&sk=3F8DE3AE&viewMode=image>.

⁶²⁹ Although Coach A indicated that his discussions with Griner were not specific to Strauss, a former Larkins student-employee (Student L) told the Investigative Team that, at some point in the mid-1980s, he and another Larkins student-employee were standing with Griner when Strauss was leaving one of the student shower facilities at Larkins and they asked Griner why OSU had not taken action to "get rid of" Strauss. According to Student L, Griner responded that he could not "get rid of" Strauss because Strauss was a tenured faculty member and therefore perceived as "untouchable."

⁶³⁰ The Investigative Team made multiple outreach attempts to request an interview with Myles but did not receive a response. However, we are aware from public reports that Myles suffered a massive stroke in 2015, which may impede his ability to participate in an interview.

⁶³¹ Our review of materials was strictly limited to OSU; we did not perform a "benchmarking" analysis to compare OSU's policies and procedures against its contemporary institutions, during the relevant time frame.

The sexual harassment policies were developed throughout the 1980s and received significant attention and revision in the early 1990s. Notably, early versions of both the student grievance and sexual harassment policies that existed in the 1980s either required or “highly recommended” that aggrieved individuals utilize “informal” methods to resolve complaints before they could avail themselves of formal mechanisms outlined in the policies. Essentially, students were instructed to approach the faculty or staff member against whom they had a complaint to informally resolve their issue, before utilizing formal complaint channels. As a general matter, the sexual harassment policies did not establish an affirmative responsibility or expectation that university employees, faculty, or students report incidents of sexual harassment if they were not themselves the subject of the harassment; likewise, the policies did not create an independent duty to investigate on the part of the University, absent a specific complaint to administration that triggered investigation procedures.

Due to the passage of time, the Investigative Team was not always able to locate complete and final versions of the relevant policies and procedures. Where a final version of a policy or procedure was not available, the Investigative Team occasionally relied on working drafts and contemporaneous communications to piece together a framework of the operational policies and procedures in effect during Strauss’ employment at the University. Non-final sources or communications are noted accordingly.

1. Student Grievance Procedures

a. Student Code of Conduct

From approximately 1971 to 1982, the University’s Code of Student Rights and Responsibilities (the “Student Code”) contained general information regarding student grievance procedures and advised students of more specific policies applicable to various University colleges, departments, and other areas.⁶³²

The 1980 version of the Student Code provided that it was “strongly recommended that the student first seek informal resolution” of a “complaint or grievance” with the “faculty member, administrator, or office involved.”⁶³³ However, if “after reasonable efforts a solution [was] not reached” then “in many cases, formal procedures [were] available.”⁶³⁴ Among the potential avenues available to students were the University’s Affirmative Action and Ombudsman offices.⁶³⁵

The Student Code also identified “hearing procedures” for complaints against faculty members alleged to have failed “to meet University responsibilities,” alleged to be

⁶³² See Press Release, Ohio State Univ. (Oct. 1, 1982) [CTRL00003647].

⁶³³ Ohio State Univ., Code of Student Rights and Responsibilities (1980–1981) [CTRL_HC_00054985] (Appendix V – Student Grievances).

⁶³⁴ *Id.*

⁶³⁵ *Id.*

“incompetent” (as “measured by the qualities considered in granting tenure”) or alleged to have engaged in “grave misconduct” (defined as “an activity that seriously impairs a faculty member’s effectiveness in meeting his/her obligations”). It explained that such occurrences were governed by Rule 3335-5-04 of the University Faculty Rules (discussed in further detail below), and that sanctions could range from written and oral warnings up to termination of employment.

In 1982, the Code of Student Rights and Responsibilities was rewritten as the “Code of Student Conduct,” with revisions approved by the Council on Student Affairs.⁶³⁶ Among other changes and updates, the section discussing the student grievance procedures outlined above was omitted from the Code of Student Conduct. The Investigative Team reviewed subsequent versions of the Student Code and it appeared that the section on Student Grievances was omitted from the Student Code beginning in 1982 through the end of the relevant time period (1998).

Although we conducted extensive searches for records of grievances relating to Strauss that may have been raised pursuant to these procedures, we did not identify any.

b. Department of Athletics

In approximately 1981, the Department of Athletics developed a grievance procedure that formalized what documentary evidence suggests was already the “unofficial” policy in place at the time.⁶³⁷ Although early copies of the Athletic Department Grievance Procedure (the “Athletics Grievance Procedure”) existed as standalone documents,⁶³⁸ an expanded version of the Grievance Procedure was folded into the Department of Athletics’ Policies and Procedures Manual in 1982 (later reformatted as a handbook of “Policies and Procedures for the OSU Student-Athlete”).⁶³⁹

⁶³⁶ Press Release, Ohio State Univ. (Oct. 1, 1982) [CTRL00003647].

⁶³⁷ See Memorandum from Hugh D. Hindman to Athletic Council Members (June 3, 1981) [CTRL_HC_00000630-31] (enclosing proposed Athletic Department Grievance Procedure for adoption at the next meeting); Memorandum from William R. Nester to Harold Enarson (May 11, 1981) [CTRL_HC_00163830] (noting that the Grievance Procedure will be presented at the next Athletic Council meeting “as a policy in place, which in truth it has been”). The Athletic Department Grievance Procedure appears to have been instituted after two fencers were expelled from the fencing team and later sued OSU. See Hugh Hindman et al., *Joint Public Statement Regarding Settlement* [CTRL_HC_00163855].

⁶³⁸ See, e.g., Ohio State Univ., Athletic Dep’t Grievance Proc. [CTRL_HC_00163856] (undated); Ohio State Univ., Proposed Athletic Dep’t Student Grievance Proc. [CTRL_HC00022081-85] (undated); Ohio State Univ., Dep’t of Intercollegiate Athletics Student Grievance Proc. [CTRL_HC00022116-20] (with handwritten date of June 1982).

⁶³⁹ Compare Ohio State Univ., Dep’t of Athletics, Pol’y & Proc. Manual (Apr. 1982) [CTRL_HC_00000483] (incorporating Department of Intercollegiate Athletics’ Student Grievance Procedure), with Ohio State Univ., Dep’t of Intercollegiate Athletics, Pol’y & Proc. for the OSU Student–Athlete [CTRL_HC_00012928] (with handwritten date of 1990–1991, and incorporating the Department of Intercollegiate Athletics’ Student Grievance Procedure), and Ohio State Univ., Dep’t of Intercollegiate Athletics, Pol’y & Proc. for the OSU Student–Athlete (1991–1992) [CTRL_HC_00012944] (incorporating the Department of Intercollegiate Athletics’ Student Grievance Procedure).

(i) Informal Resolution

Similar to the Student Code in effect at the time, the 1981 version of the Athletics Grievance Procedure required students to pursue an informal resolution process before undertaking a formal complaint. In particular, it stated that “[a]ny student complaint or grievance involving an athletic team, coach, department official or policy shall first be sought to be resolved informally by the student with the individual coach, official or office involved.”⁶⁴⁰ If a student felt that these initial attempts at informal resolution were unsuccessful, the student could request in writing that the Director of Athletics consider the matter, at which point the student would have an “informal” meeting with the Director, who would provide a decision within seven days. If the matter was still not resolved to the student’s satisfaction, the student had 10 days to appeal to the Vice President of Student Services, who could hear the matter himself, assign it to a designee, or appoint an ad hoc advisory panel to hear the matter. Within seven days, the hearing official was required to render a “conclusive decision.”

The revised 1982 Grievance Procedure crystallized the distinction between “informal” and “formal” resolution procedures, while still providing that the student was “required to employ the informal procedure prior to taking formal action.”⁶⁴¹ The Procedure indicated that students with complaints or grievances “should discuss and attempt to resolve the complaint” informally with the other party, and if a resolution could not be reached, the student “may consult with a third party (“resource person”) with whom” the student was “comfortable” (e.g., a coach, academic advisor, or other staff member).⁶⁴² With “the aid” of the resource person, the Procedure provided that the student “should make an additional attempt to resolve the problem” with the subject of the complaint/grievance.⁶⁴³ If “no satisfactory resolution” could be achieved, then the student could request that “the resource person call together the persons involved in an attempt to facilitate an informal resolution.”⁶⁴⁴ If such a meeting was “unfeasible,” or if the parties were still unable to resolve the complaint to their satisfaction, only then could the student utilize the formal grievance procedure.⁶⁴⁵

(ii) Formal Resolution

To invoke the formal grievance procedure, the student was required to notify the Director of Athletics of the grievance in writing.⁶⁴⁶ Within 72 hours of receiving the complaint, the Athletics Director (or his designee) was to “conduct a preliminary interview” with the student,

⁶⁴⁰ Ohio State Univ., Athletic Dep’t Grievance Proc. [CTRL_HC_00000631] (stamped as received on June 4, 1981); Ohio State Univ., Athletic Dep’t Grievance Proc. [CTRL_HC_00163856] (undated grievance procedure matching 1981 procedure submitted to Athletics Council).

⁶⁴¹ See Ohio State Univ., Dep’t of Athletics, Pol’y & Proc. Manual (Apr. 1982) [CTRL_HC_00000483].

⁶⁴² *Id.*

⁶⁴³ *Id.*

⁶⁴⁴ *Id.*

⁶⁴⁵ *Id.* (requiring students “to employ the informal procedure prior to taking formal action”).

⁶⁴⁶ *Id.*

and could also “contact the person(s) about whom the complaint” was being lodged.⁶⁴⁷ Then, within 72 hours of the preliminary interview with the student grievant, the Director was to conduct “a formal hearing” with the student-grievant, the person(s) against whom the complaint was made, and “any witnesses either party” wished to bring.⁶⁴⁸ Each party was permitted to “be accompanied by an adviser.”⁶⁴⁹ Within 48 hours of the formal hearing, the Director was to notify the student-grievant, in writing, of the decision.⁶⁵⁰

If the student was still unsatisfied with the outcome, the student could appeal in writing within 72 hours to the Vice President of Student Services.⁶⁵¹ Within 72 hours of receiving the appeal, the Vice President, his designee, or an appointed panel were required to conduct a hearing including all parties.⁶⁵² If the hearing was conducted by a panel, the panel had to deliver a recommendation to the Vice President within 24 hours of the hearing. Within 72 hours of the hearing, the Vice President notified the grievant in writing of the decision on appeal, which was final.

We did not receive any witness statements or locate evidence in our document searches of University files indicating that student-athletes utilized the “formal” Athletic Department Grievance Procedure to complain about Strauss. While “informal” attempts to resolve complaints about Strauss certainly may have occurred—i.e., students complaining to a coach, trainer, etc.—these incidents were not memorialized or logged as such under the Athletic Department Grievance Procedure. To the extent the Investigative Team received witness statements reflecting any informal attempts at resolving grievances against Strauss, those incidents have been summarized in this Report.

c. Student Health Services

Beginning in the mid-to-late 1980s, patients of Student Health Services could invoke a formal Patient Grievance Procedure to raise any issues related to treatment or care that they received at Student Health Services.⁶⁵³ The Patient Grievance Procedure was published in Student Health Services’ Policies and Procedures manual and posted in the lobby of the student health building on campus.⁶⁵⁴

The Patient Grievance Procedure “encouraged” patients “to express their concerns either written or verbally,” and provided patient evaluation forms for written “patient comments

⁶⁴⁷ *Id.*

⁶⁴⁸ *Id.*

⁶⁴⁹ *Id.*

⁶⁵⁰ *Id.*

⁶⁵¹ *Id.*

⁶⁵² *Id.*

⁶⁵³ Ohio State Univ., Univ. Health Serv., Pol’y & Proc. Manual [CTRL00003651] (1989 memo attaching grievance procedure). The Investigative Team was only able to identify a copy of this document as revised in 1987.

⁶⁵⁴ *Id.*

regarding services received.”⁶⁵⁵ Patients were also “encouraged” to contact Student Health’s Assistant Director for Administration with any grievances.⁶⁵⁶ The Assistant Director and Student Health Director were to review all patient comments, as were any parties cited in the patient’s comment, although the procedure also provided that “the matter” would be “kept confidential.”⁶⁵⁷ Once the relevant parties evaluated the matter, “action [was to be] designed to provide a fair solution acceptable to all.”⁶⁵⁸ The policy did not provide specific procedures for doing so or outline any particular outcomes to resolution.

As described above in this Report, we identified evidence that Students A, B, and C reported their complaints about Strauss to Student Health Service administrators. We did not identify any other documentary evidence of Student Health Center patient complaints against Strauss.

2. Policies Governing Staff at Student Health Services and OSU Hospitals

a. Student Health Services Policies

As early as July 1979, Student Health Services published Regulations of the Professional Staff (the “Regulations”) documenting “internal operating procedures of the University Health Service,” which functioned in tandem with “the directives, framework and context of the statutes, by-laws, rules and operating procedures of The Ohio State University.”⁶⁵⁹ The Regulations governed professional staff, defined “to include all staff duly licensed or certified by their respective professional organizations and/or the State of Ohio to render direct care to patients insofar as their training, licensure, or certification allows.”⁶⁶⁰ The Regulations did not distinguish between professional staff and “medical staff” for purposes of applicable rules and by-laws.⁶⁶¹

Under the Regulations, “any member of the medical staff” could request “corrective action against” “any practitioner with clinical privileges” when the practitioner’s “activities or conduct” were “considered to be lower than the standards or aims of the medical staff or to be

⁶⁵⁵ *Id.*; see also Ohio State Univ., Univ. Health Serv., Patient Evaluation [CTRL00003649] (blank patient evaluation form as of 1986).

⁶⁵⁶ Ohio State Univ., Univ. Health Serv., Pol’y & Proc. Manual [CTRL00003651].

⁶⁵⁷ *Id.*

⁶⁵⁸ *Id.*

⁶⁵⁹ See Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (July 1979) [CTRL_HC_00149143]; Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (May 1982) [CTRL_HC_00001286]. The Investigative Team identified versions of the Regulations dated 1979 and 1982. No versions of the Regulations post-dating 1982 were located. The Corrective Action sections of the 1979 and 1982 Regulations are identical.

⁶⁶⁰ Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (July 1979) [CTRL_HC_00149143]; Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (May 1982) [CTRL_HC_00001286].

⁶⁶¹ Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (July 1979) [CTRL_HC_00149143]; Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (May 1982) [CTRL_HC_00001286].

disruptive to the operation of the University Health Service.”⁶⁶² The Regulations did not provide specific procedures for corrective action requests; rather, the Regulations invoked other University procedures, stating that “[a]ll requests for corrective action shall be in accordance with appropriate University statutes, rules and by-laws.”⁶⁶³

In approximately February 1997, Student Health Services formalized a Complaint Policy for Alleged Acts of Serious Misconduct (“Complaint Policy”), applicable to “complaint[s] that an employee has acted manifestly outside the scope of his or her employment or official responsibilities.”⁶⁶⁴

The Complaint Policy outlined a procedure for Student Health administrators to follow when evaluating a complaint from a “patient or another credible individual.”⁶⁶⁵ We note that, in several places, it is unclear from the plain text of the Complaint Policy whether (and which of) the investigative steps outlined were mandatory or optional.

After receiving a complaint “in person or in writing,” an unspecified “medical administrator” was to evaluate the complaint’s “gravity,” consider whether immediate administrative leave was appropriate, and notify the employee’s supervisor, the Director of Student Health, the Vice Presidents for Student Affairs and Health Sciences, and Human Resources, Legal Affairs, and/or the Campus Police.⁶⁶⁶ Upon securing the medical record and/or other relevant evidence, the Student Health administrator was to “investigate the visit” and to gather additional background information from interviews and other documentary sources.⁶⁶⁷

At least two administrators were to interview the accused employee, and the administrator was to consult with outside authorities, including mental health or other experts, legal counsel, Campus Police, and witnesses.⁶⁶⁸ Once the factual investigation concluded, an “internal leadership council” was to consider the information gathered and draft a written summary and conclusions.⁶⁶⁹ The “recommendations” outlined in the Complaint Policy ranged from “[n]o disciplinary action” to termination.⁶⁷⁰ The complaint process closed upon notification of the results to all involved parties, including the complainant, employee, Vice Presidents of Student Affairs and Health Sciences, and the State Medical Board of Ohio (“if indicated”).⁶⁷¹

⁶⁶² Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (July 1979) [CTRL_HC_00149143]; Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (May 1982) [CTRL_HC_00001286].

⁶⁶³ Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (July 1979) [CTRL_HC_00149143]; Ohio State Univ., Univ. Health Serv., Regs. of Prof. Staff (May 1982) [CTRL_HC_00001286].

⁶⁶⁴ Memorandum from Ted Grace to A. Pangalangan (Feb. 18, 1997) [CTRL_HC_00007522] (enclosing policy).

⁶⁶⁵ *Id.*

⁶⁶⁶ *Id.*

⁶⁶⁷ *Id.*

⁶⁶⁸ *Id.*

⁶⁶⁹ *Id.*

⁶⁷⁰ *Id.*

⁶⁷¹ *Id.*

As described above in this Report, we identified evidence that Students A, B, and C reported their complaints about Strauss to Student Health Service administrators. We did not identify any other documentary evidence of Student Health Center patient complaints against Strauss. Moreover, the Complaint Policy for Alleged Acts of Serious Misconduct was not formalized until February 1997, which post-dated Strauss' removal from Student Health.

While "informal" attempts to resolve complaints about Strauss certainly may have occurred, we did not find documentary evidence of any such incidents. To the extent the Investigative Team received witness statements reflecting any informal attempts at resolving grievances against Strauss, those incidents are summarized in Section VI of this Report.

b. Bylaws of the Medical Staff at OSU Hospitals

The Ohio State University Hospitals published their own policies in the Bylaws of the Medical Staff ("Medical Staff Bylaws"), including Bylaw 3335-43-05 ("Corrective action" for Medical Staff) and 3335-43-06 ("Hearing and appellate review procedures").⁶⁷² The relevant portions of the Medical Staff Bylaws were amended in 1978, 1983, 1994, and 1998.⁶⁷³

The Medical Staff Bylaws allowed for certain University employees and officials—including, but not limited to, the chiefs of clinical divisions or departments, the medical director, an officer or member of the medical staff, and the dean of the College of Medicine—to "initiate[]" corrective action against a member of the medical staff whenever the individual felt a member of the medical staff's "activities or professional conduct" violated the medical staff's "standard or aims" or "standards of professional conduct"; were "disruptive to the operation of the university hospitals"; violated University bylaws, rules, and regulations; or violated state or federal law.⁶⁷⁴ Until 1983, "bring[ing] discredit upon the good name of the staff or of the

⁶⁷² Ohio State Univ. Hosps., Bylaws of the Medical Staff arts. V & VI (Mar. 3, 1978) [CTRL00005305–07, 5315–20]; Ohio State Univ. Hosps., Bylaws of the Medical Staff §§ 3335-43-05 & -06 (May 21, 1983) [CTRL00005310–13]; Ohio State Univ. Hosps., Bylaws of the Medical Staff §§ 3335-43-05 & -06 (Jan. 31, 1994) [CTRL00005308–11]; Ohio State Univ. Hosps., Bylaws of the Medical Staff §§ 3335-43-05 & -06 (Mar. 20, 1998) [CTRL00005309–12]. In 1978, the Bylaws initially had different numbering—corrective action procedures were found in Article V of the Bylaws. Handwritten notations on the 1978 Bylaws indicate this was codified into Bylaw 3335-43, and hearing and appellate review procedures were available at 3335-45-01. By the time the 1983 Bylaws were published, the numbering was revised to incorporate these procedures in Bylaws 3335-43-05 and -06, numbering which remained through Strauss' time at OSU.

⁶⁷³ Ohio State Univ. Hosps., Bylaws of the Medical Staff § 3335-43-05 (Mar. 20, 1998) [CTRL00005309] (listing prior effective dates of 3/13/78, 5/21/83, 1/31/94, and 3/20/98); *cf.* Ohio State Univ. Hosps., Bylaws of the Medical Staff (Feb. 1, 1985) [CTRL_HC_00048307] (indicating that the broader Bylaws were approved by the Hospitals Board in 1982, by the Board of Trustees in 1983, and further ratified in 1985).

⁶⁷⁴ See Ohio State Univ. Hosps., Bylaws of the Medical Staff art. V, § 1(A) (Mar. 3, 1978) [CTRL00005305]; Ohio State Univ. Hosps., Bylaws of the Medical Staff § 3335-43-05(a)(1) [CTRL00005310]; Ohio State Univ. Hosps., Bylaws of the Medical Staff § 3335-43-05(a)(1) (Jan. 31, 1994) [CTRL00005308]; Ohio State Univ. Hosps., Bylaws of the Medical Staff § 3335-43-05(a)(1) (Mar. 20, 1998) [CTRL00005309].

Hospitals” was also a basis for corrective action.⁶⁷⁵ To initiate corrective action, the requestor submitted a detailed request in writing to the dean of the College of Medicine.⁶⁷⁶ Other than certain procedural and wording revisions and revisions noted herein, the Bylaws remained substantively unchanged between 1978 and 1998.⁶⁷⁷

As noted above, the Investigative Team did not identify any evidence (or receive allegations) that complaints about Strauss’ misconduct were reported through channels within the University Hospitals system. Accordingly, we did not locate evidence that complaints about Strauss were ever raised or addressed through the Medical Staff Bylaws.

3. Faculty Rules, Scholarly Misconduct & Sexual Harassment Policy

a. Rules of the University Faculty

The University Faculty Rules (“Faculty Rules”), through Rule 3335-5-04, outlined the procedures for certain complaints against faculty members, including “incompetence,” “grave misconduct,” or “failure to meet [U]niversity responsibilities.”⁶⁷⁸

Hearing procedures for complaints against faculty existed in the Faculty Rules since at least 1983.⁶⁷⁹ The Faculty Rules provided that complaints should be initiated by filing a written statement with the chairperson of the respondent’s department.⁶⁸⁰ This initial complaint served as the basis for the investigation moving forward: the burden of proof rested with the complainant, and at each stage of deliberation, the fact-finder was only permitted to consider charges set forth in the initial complaint.⁶⁸¹ Although the Rule outlined formal grievance procedures, it also emphasized that at each stage of the process, the relevant officials must nevertheless “attempt, through the use of informal consultation, to resolve complaints.”⁶⁸² Upon conclusion of a disciplinary hearing, the hearing panel sent written findings of fact and a

⁶⁷⁵ Compare Ohio State Univ. Hosps., Bylaws of the Medical Staff art. V, § 1(A) (Mar. 3, 1978) [CTRL00005305], with Ohio State Univ. Hosps., Bylaws of the Medical Staff §§ 3335-43-05 & -06 (May 21, 1983) [CTRL00005310].

⁶⁷⁶ See Ohio State Univ. Hosps., Bylaws of the Medical Staff (Feb. 1, 1985) [CTRL_HC_00048307].

⁶⁷⁷ Compare Ohio State Univ. Hosps., Bylaws of the Medical Staff art. V, § 1(A) (Mar. 3, 1978) [CTRL00005305] (handwritten notations indicating that policy was numbered as § 3335-43-01(A)), with Ohio State Univ. Hosps., Bylaws of the Medical Staff § 3335-43-05(A)(1) (Mar. 20, 1998) [CTRL00005309].

⁶⁷⁸ Ohio State Univ., University Faculty Rules [CTRL_HC_00008911]. “Incompetence” allegations referred to “a faculty member’s failure to meet his defined faculty obligations.” “Grave misconduct” referred to activities that “seriously impair[ed] a faculty member’s effectiveness in meeting his defined teaching, service, and research obligations.” *Id.*

⁶⁷⁹ The Investigative Team was unable to locate a complete copy of Faculty Rule 3335-5-04 from earlier than 1989. See Ohio State Univ., University Faculty Rules [CTRL_HC_00002507] (incomplete version of Rule 3335-5-04 from 1983); see also Ohio State Univ., University Faculty Rules [CTRL_HC_00008911] (Rule 3335-5-04 as of 1989).

⁶⁸⁰ Ohio State Univ., University Faculty Rules [CTRL_HC_00008911]. After a complaint had been filed, the department chairperson could escalate it to the dean or vice president for review. If the vice president or a hearing committee issued an order for dismissal, the respondent could appeal to the University President and/or the Board of Trustees.

⁶⁸¹ *Id.*

⁶⁸² *Id.*

recommendation regarding sanctions to the University President, who could request further review, dismiss the complaint, impose sanctions less than termination, or submit a recommendation of termination to the Board of Trustees.⁶⁸³

Major revisions to Faculty Rule 3335-5-04 were approved by the University Senate and Board of Trustees around 1993 and remained in place at least through July 1998.⁶⁸⁴ First, the revisions expanded the scope of complaints, allowing University employees to file “complaints alleging any form of discrimination or sexual harassment,” and permitting complainants to incorporate facts in their complaint supporting any allegation that a faculty member “has violated [U]niversity rules.”⁶⁸⁵ Notably, the hearing panel could only recommend termination of tenured faculty members “in demonstrated cases of gross or serious incompetence or grave misconduct,” the definitions of which did not change from the earlier version.⁶⁸⁶ The revised Faculty Rules also gave the provost authority to “temporarily and immediately reassign” any faculty member who posed “a clear and present danger to persons or property,” even if a complaint had not yet been filed.⁶⁸⁷

We did not locate any evidence (or receive allegations) indicating that complaints about Strauss were raised or addressed through the Faculty Rules.

b. Faculty Handbook

The Faculty Handbooks published by the University collected and republished applicable University policies that were already in place and available elsewhere. For instance, the Faculty Handbook published in 1984 expressly referenced and reprinted the sexual harassment policy as written in the Operating Manual.⁶⁸⁸ In 1995, the Office of Academic Affairs prepared and circulated a revised Draft Faculty Handbook⁶⁸⁹ which, like the 1984 Faculty Handbook, simply

⁶⁸³ *Id.*

⁶⁸⁴ See Memorandum from Nancy M. Rudd to Deans, Directors, & Department Chairpersons (Jan. 10, 1993) [CTRL_HC00025552] (recognizing and enclosing revised Rule 3335-5-04 and noting that the revisions constituted “major changes in procedures and sanctions compared to the previous version of the rule”); cf. Ohio State Univ., University Faculty Rules (Aug. 11, 1997) [CTRL_HC_00152624]; Ohio State Univ., University Faculty Rules (July 17, 1998) [CTRL_HC_00152813].

⁶⁸⁵ See Memorandum from Nancy M. Rudd to Deans, Directors, & Department Chairpersons (Jan. 10, 1993) [CTRL_HC00025552] (enclosing revised Rule 3335-5-04).

⁶⁸⁶ *Id.*

⁶⁸⁷ *Id.*

⁶⁸⁸ Compare Ohio State Univ., Faculty Handbook (Oct. 1984) [CTRL_HC_00001620] (providing Sexual Harassment section of Faculty Handbook), with Ohio State Univ., Op. Manual: Sexual Harassment (Jan. 6, 1983) [CTRL_HC_00164812]. Although formatted differently, the two policies are virtually identical, and the Faculty Handbook expressly incorporates and reprints the Sexual Harassment Policy word-for-word, with the exception of Operating Manual 1.15(C) (“Responsibilities”), see Ohio State Univ., Operating Manual: Sexual Harassment (Jan. 6, 1983) [CTRL_HC_00164812], which is not reprinted in the Faculty Handbook.

⁶⁸⁹ See Ohio State University, Office of Acad. Affairs, Draft Faculty Handbook (Oct. 1995) [RHS_000252–321]. The introduction to the 1995 version notes that although the handbook is labeled “DRAFT,” this was a formality, and “the material provided [i]n herein accurately convey[ed] current University Faculty Rules, policies and practices regarding faculty appointments and activities.” Ohio State Univ., Office of Acad. Affairs, Draft Faculty Handbook

re-printed University policies published elsewhere, including the sexual harassment policy and Faculty Rule 3335-5-04.⁶⁹⁰

c. Guidelines on Misconduct in Scholarly Activities

In response to requirements of various federal funding agencies, the University's Council of Research and Graduate Studies published and maintained Guidelines on Misconduct in Scholarly Activities ("Guidelines") as a supplement to the Faculty Rules in place at the time.⁶⁹¹ The Investigative Team has only identified Guidelines dated May 5, 1989; it is unclear how long these were in effect.

The Guidelines provided that the Vice President for Research and Graduate Studies was responsible for "general oversight" of the review of any potential misconduct involving research and scholarship, which was "broadly construed."⁶⁹² Upon receiving "a report or formal complaint alleging possible misconduct" either from the dean or any other person, the Vice President appointed a designee to conduct a preliminary review. Unless the preliminary review revealed the report "to be clearly without substance," a committee of inquiry then reviewed the allegations and, if it determined there were "reasonable and adequate grounds to warrant a formal investigation," submitted to the Vice President a written statement constituting "the formal allegation on behalf of the institution."⁶⁹³ At that point, a committee of investigation was appointed to investigate and "prepare a written report of its findings on the formal allegation, on any other indications of misconduct in scholarly activities discovered during its investigation, and on its recommendations for action."⁶⁹⁴ Actions based on the committee's report were limited "to those necessary and proper to ensure the integrity of research, the rights and interest of research subjects and the public, and the observance of legal requirements or responsibilities."⁶⁹⁵ Any actions "beyond those necessary to meet these goals" were only permitted after the allegations went through the formal hearing procedures described in Faculty Rule 3335-5-04.

(Oct. 1995) [RHS_000255]. Faculty were instructed to reference the 1995 Draft Faculty handbook instead of the 1984 Faculty Handbook, as much of the 1984 Faculty Handbook's content was by then "obsolete." See Ohio State Univ., Office of Acad. Affairs, Draft Faculty Handbook (Oct. 1995) [RHS_000255] (introduction to 1995 Draft Faculty Handbook from N. Rudd, Vice Provost). The Investigative Team has been unable to locate a final version of the 1995 Draft Faculty Handbook.

⁶⁹⁰ Ohio State Univ., Pol'y & Proc. Manual: Sexual Harassment (Nov. 5, 1993) [RHS_000311-21]; Ohio State Univ., Office of Acad. Affairs, Draft Faculty Handbook (Oct. 1995) [RHS_000297-304] (reprinting Faculty Rule 3335-5-04 in 1995 Draft Faculty Handbook).

⁶⁹¹ Ohio State Univ., Council of Research and Graduate Studies, Guidelines on Misconduct in Scholarly Activities 1-2 (May 5, 1989) [RHS_000305-06].

⁶⁹² *Id.*

⁶⁹³ *Id.*

⁶⁹⁴ *Id.*

⁶⁹⁵ *Id.*

d. University's Sexual Harassment Policy

The University enacted its primary Sexual Harassment Policy in 1980, with revisions in 1983 and 1993 (hereinafter, the "Sexual Harassment Policy" or the "Policy").⁶⁹⁶

The University's Sexual Harassment Policy was enacted and incorporated into the University's Operating Manual in 1980 as a joint effort involving the Office of Personnel Services and the Office of Affirmative Action.⁶⁹⁷ As relevant here, the Policy defined "sexual harassment," in part, as "sexual contact of any nature which is not freely and mutually agreeable to both parties."⁶⁹⁸ At that point in time, the Policy applied to "employment and/or academic relationships among faculty, staff and students."⁶⁹⁹ Although the 1980 policy instructed individuals who believed they had been sexually harassed to contact the Office of Affirmative Action, it also emphasized that "[t]he first efforts in response to a grievance or complaint shall be made on an informal basis."⁷⁰⁰ The University's formal grievance procedures applied only "[i]f no informal resolution of the complaint [was] achieved by the Office of Affirmative Action."⁷⁰¹

The Policy was revised in 1983. Among other changes, the 1983 Policy clarified that formal grievance procedures were appropriate where there was "no *satisfactory* informal resolution of the complaint."⁷⁰² Moreover, while the 1980 policy required disciplinary action upon "a demonstrated instance of sexual harassment," the 1983 policy required disciplinary action upon "a violation of [the] policy."⁷⁰³

⁶⁹⁶ The Sexual Harassment Policy was initially contained in the University's Operating Manual and, later, the Policy and Procedure Manual.

⁶⁹⁷ Memorandum from W. Ann Reynolds to Marlene Longenecker (Oct. 24, 1980) [CTRL_HC_00162539]; *see also* Ohio State Univ., Operating Manual: Sexual Harassment (Oct. 1, 1980) [CTRL_HC_00124307-08]; Ohio State Univ., Student Servs., Sexual Harrassment [*sic*] Pol'y & Proc. [CTRL_HC_00164812] ("Sexual harassment by staff and faculty members, including student employees, is a violation of University personnel policy set forth in the University Operating Manual. In these cases, the University personnel policy shall take precedence over this student policy."); Ohio State Univ., Student Servs., Sexual Harassment Pol'y & Proc. (Apr. 21, 1982) [CTRL_HC_00018224] (same).

⁶⁹⁸ Ohio State Univ., Op. Manual: Sexual Harassment (Oct. 1, 1980) [CTRL_HC_00124307].

⁶⁹⁹ *Id.*

⁷⁰⁰ *Id.*

⁷⁰¹ *Id.*

⁷⁰² Ohio State Univ., Op. Manual: Sexual Harassment (Jan. 6, 1983) [CTRL_HC_00164812] (emphasis added).

⁷⁰³ Compare Ohio State Univ., Op. Manual: Sexual Harassment (Oct. 1, 1980) [CTRL_HC_00124307], with Ohio State Univ., Op. Manual: Sexual Harassment (Jan. 6, 1983) [CTRL_HC_00164812].

The Board of Trustees approved significant amendments to the Policy in 1993,⁷⁰⁴ including centralizing enforcement of the Policy by the Office of Human Resources.⁷⁰⁵ Among other updates, the University expanded the definition of “sexual harassment” to include “any unwelcome sexual advance, request for sexual favor, reference to gender or sexual orientation, or other physical or verbal conduct of a sexual nature” where “[s]ubmission to or rejection of such conduct [was] used either explicitly or implicitly as a basis for any decision affecting terms or conditions of an individual’s employment, participation in any program or activity, or status in an academic course,” or where “[s]uch conduct ha[d] the effect of unreasonably interfering with an individual’s work performance or educational experience, or create[d] an intimidating, hostile or offensive environment for working, learning, or living on campus, and ha[d] no legitimate relationship to the subject matter of a course.”⁷⁰⁶

In the 1993 version, accompanying procedures provided additional detail regarding conduct prohibited under the Policy.⁷⁰⁷ Sexual harassment was defined as encompassing “any sexual attention that [was] unwanted.”⁷⁰⁸ Verbal or physical conduct prohibited by the University’s Sexual Harassment Policy included, but was not limited to: physical assault; direct or implied threats of “that submission to sexual advances” would be “a condition of employment, work status, promotion, grades, or letters of recommendation;” direct propositions of “a sexual nature” and/or “subtle pressure for sexual activity” which was “unwanted and unreasonably interfere[d] with a person’s work or academic environment;” a “pattern of conduct” that caused “discomfort or embarrassment,” including: (1) comments of a sexual nature; (2) sexually explicit statements, questions, jokes, or anecdotes; (3) touching, patting, hugging, brushing against a person’s body, or repeated or unwanted staring; or (4) remarks about sexual activity, experience, or orientation; and/or (5) “display of inappropriate sexually oriented materials” where others could see it; when such conduct, comments, actions or materials “unreasonably interfere[d] with a person’s work or academic environment.”⁷⁰⁹

The 1993 Policy also eliminated the earlier requirement that complainants pursue informal resolution of their grievances before filing any formal complaint.⁷¹⁰ While informal

⁷⁰⁴ See Ohio State Univ., Pol’y. & Proc. Manual: Sexual Harassment (Nov. 5, 1993) [RHS_000412–24]; cf. Ohio State Univ., Sexual Harassment Pol’y (Sept. 27, 1993) [CTRL_HC_00018557] (draft version of policy virtually identical to final policy with missing pages); Memorandum to University Faculty, Staff, & Students [CTRL_HC_00018570] (draft version of policy with handwritten date of September 16, 1993); Ohio State Univ., Sexual Harassment Pol’y [CTRL_HC_00106414] (post-1993 Office of Human Resources brochure summarizing sexual harassment policy); Ohio State Univ., Sexual Harassment Pol’y [CTRL_HC_00018684] (same).

⁷⁰⁵ See Memorandum from Helen M. Ninos to President’s Committee on Diversity (May 9, 1995) [CTRL_HC_00110793].

⁷⁰⁶ Ohio State Univ., Pol’y & Proc. Manual: Sexual Harassment (Nov. 5, 1993) [RHS_000412–24]

⁷⁰⁷ *Id.*

⁷⁰⁸ *Id.*

⁷⁰⁹ *Id.*

⁷¹⁰ See Ohio State Univ., Sexual Harassment Pol’y (Sept. 27, 1993) [CTRL_HC_00018557] (draft Sept. 27, 1993 version) (“The filing of an informal complaint is not a prerequisite to a formal complaint.”); Ohio State Univ., Pol’y & Proc. Manual: Sexual Harassment (Nov. 5, 1993) [RHS_000417] (same).

resolution of complaints was still encouraged, the revised policy ensured that complainants were apprised of all available options, including filing a formal complaint with the Office of Human Resources' Office of Dispute Resolution Services and filing a grievance outside the University system (e.g., with the Equal Employment Opportunity Commission, the Ohio Civil Rights Commission, the Department of Education, or through a private lawsuit).⁷¹¹

We did not receive any witness statements or locate evidence in our document searches of University files indicating that complaints about Strauss were addressed through the University's Sexual Harassment Policy.

VIII. CONCLUSION

As stated at the outset of this Report, we recognize and appreciate the courage of each former student who stepped forward to share with us their deeply personal experiences with Strauss. Although we worked with all deliberate speed in conducting the Independent Investigation, and we were not constrained by resources to do so, the process necessarily required roughly 12 months of time to diligently pursue important evidentiary leads that were central to our fact-finding mandate.

We also appreciate the willingness of so many former University employees and other relevant witnesses to cooperate in the Independent Investigation, and to share their own recollections with candor and truthfulness. These individuals had no legal compulsion to speak with us but did so anyway to help us develop a substantive and credible record of what occurred. Many expressed their profound regret for not recognizing signs of potential abuse, or acting on those signs of abuse, at the time.

We similarly extend our sincere gratitude to the Strauss family for its extensive cooperation with the Investigative Team.

Lastly, we note that, during the Investigation, we received allegations pertaining to issues outside the scope of our mandate. In those cases, we forwarded those allegations on to law enforcement authorities or to the attention of the University's Special Counsel.

IX. APPENDIX

Exhibit A (Dr. Landry Curriculum Vitae)

Exhibit B (Dr. Wang Curriculum Vitae)

Exhibit C (List of Strauss' publications reviewed by Perkins)

⁷¹¹ Ohio State Univ., Pol'y & Proc. Manual: Sexual Harassment (Nov. 5, 1993) [RHS_000416].

EXHIBIT A

CURRICULUM VITAE

09/18

Name: Gregory Lance Landry, MD
Home Address: 7513 Voss Pkwy, Middleton, WI 53562
Phone: home ph: 608-831-3090
Email: gllandry@wisc.edu

EDUCATION:

1972-1976 Butler University, Indianapolis, Indiana B.S. (Cum Laude with Highest Honors in Chemistry)
1976-1980 Indiana University School of Medicine (M.D.)

POSTGRADUATE EDUCATION:

1980-1983 Internship and Residency, Department of Pediatrics, University of Wisconsin Hospital and Clinics, Madison, WI
1983-1984 Fellowship, Ambulatory and Behavioral Pediatrics, University of Wisconsin; Madison, WI

PROFESSIONAL CERTIFICATION:

1985 American Board of Pediatrics
1997, 2007 American Board of Pediatrics, Certificate of Added Qualification in Sports Medicine

PROFESSIONAL APPOINTMENTS:

1976 Instructor, Organic Chemistry (summer session), Butler University
1984-1989 Assistant Professor (CHS), Department of Pediatrics, University of Wisconsin; Madison, WI
1990-1993 Associate Professor (CHS), Department of Pediatrics, University of Wisconsin; Madison, WI
1994-2017 Professor (CHS), Department of Pediatrics, University of Wisconsin; Madison, WI
1994-2000, 2004-2009 Head, Division of General Pediatrics and Adolescent Medicine, University of Wisconsin, Madison, WI
1994-2017 Medical director, University Station Pediatric and Adolescent Clinic

PROFESSIONAL ACTIVITIES:

1983 Camp Physician, Camp Superkids Asthma Camp, Minneapolis, Minnesota, July.
1983 Volunteer Medical Examiner, Special Olympic Athletes, Lakeland School, Lakeland, WI
1983-2015 Active Staff, University of Wisconsin Hospital
1986-2015 Associate Staff, Meriter Hospital
1983-2008 Courtesy Staff, St. Mary's Hospital, Madison, WI
1984-2015 Head Medical Team Physician, University of Wisconsin Athletic Teams
1984-1992 Team Physician, Madison Capitols "Junior A" Hockey Team
1985 Medical Director, 1st Annual Madison Hospital Fun Run, 2nd Annual U.W. Sports, Medicine and Fitness Center Run for the Rep., UW Asthma and Allergy Run
1985, 1987, 1989, 1990 Medical volunteer, Annual Badger State Games, (gymnastics, basketball '85, track and field '87, '89, cycling '90)
1986-1990 Associate Medical Director, "Crazy Legs Annual Run," UW Athletic Department, Madison, WI
1986-1991 Member, Board of Directors, Wisc. Clearinghouse (educational material on AODA)
1987-1991 Associate Medical Director, U.W. Sports Medicine Clinic, Mini-Triathlon
1987-1990 Participant in University of Wisconsin, Medical School Mentor Program
1988-1991 Volunteer physician, Wisconsin Interscholastic Athletic Association
1988 State Tournaments in boys' wrestling and girls' basketball, Madison, WI
1988 Volunteer physician (two weeks), United States Olympic Training Center, Colorado Springs, CO

PROFESSIONAL ACTIVITIES cont'd:

1988 Volunteer physician, Midwest Junior Wrestling Tournament, Madison, WI
1989 Invited Volunteer physician, U.S. Olympic Sports Festival, July 6-15, 1990, covered wrestling and diving, Minneapolis/St. Paul, MN
1991 Invited Team Physician, U.S. Select Ice Hockey Team, Pravda Cup Tournament, Leningrad, Soviet Union
1991 Invited Medical Team Physician, USA Hockey Team, Olympic Team Tryouts, St. Cloud, MN, USA vs Milwaukee Admirals, Milwaukee, WI, USA vs Ottawa, Ottawa, Canada, USA Cup, Albany, NY
1992 Invited Team Physician, Winter Olympic Games, Albertville, France, Nordic-Skiing and Biathlon Teams
1992-2005, 2008-present Member, Editorial Board, Physician and Sportsmedicine
1994-2006 Volunteer Physician, Salvation Army homeless shelter, Briarpatch shelter for adolescents
1995-2003 "Celebrity Guest", Wisconsin Special Olympics, Stevens Point, WI
1998-2005 Member, National Athletic Trainers Association Research and Education Foundation Board
1998-2016 Medical director, U.W. Athletic Training Education Program
1999-2004 Editorial Board, Archives of Pediatrics and Adolescent Medicine
2002-present Editorial Board, Current Sports Medicine Reports

HONORS AND AWARDS:

1973 Phi Eta Sigma National Freshman Honorary, Butler University
1974, 1975 Varsity letter winner, Butler University, football (quarterback)
1976 Blue Key National Senior Honorary, Butler University
1977 "Most Outstanding Student", Butler University (given to one male and one female based on academic and extracurricular achievements)
1979, 1980 Class President, Indiana University School of Medicine
1983 "Best Teaching Resident" Award Nominee by third year medical school class
1991 Clinical Teaching Award, Department of Family Medicine
1994 Dean's Award for Excellence in Health Communication, (with the media), U.W. Medical School
2000,2004,2006,2010,2012 "Top Doc" in sports medicine as voted by peers, Madison Magazine
2001 Tom Shaffer award for lifetime achievement in pediatric sports medicine, American American Academy of Pediatrics Section of Sports Medicine
2002 Clinical Teaching Award for best mentor during the third and fourth years, U.W. Medical School Class of 2002.
2006 2005-06 Best Doctors in America listing
2008 Captain's Cup, University of Wisconsin football team given to a non-player or coach for dedication and unselfish commitment to the football program
2015 Francis "Gramps" O'Sheridan Award, U.W. Men's Ice Hockey program, given to a non-player or coach for dedication and commitment to the hockey program

SOCIETY MEMBERSHIPS:

American College of Sports Medicine
Society for Adolescent Medicine
American Academy of Pediatrics
American Medical Society for Sports Medicine, Founding Member
Secretary-Treasurer 1991-1995
Second Vice President 1995-1996
First Vice President 1996-1997
President 1997-1998

COMMITTEES: (*regional **national)

1981-82, 1984-86 University of Wisconsin Department of Pediatric Housestaff Selection Committee
1983-2001 University of Wisconsin Athletic Department "CORE" Committee (regarding the athlete in trouble) called "support" Committee 1990-present
1983-2017 *American Academy of Pediatrics - Wisconsin Chapter Committee on Sports Medicine
1984-1988 U-Care (Health Maintenance Organization) Utilization Review/Quality Control Committee
1984-2015 University of Wisconsin Athletic Department Ad Hoc Committee on Drug Testing of Athletes
1985-2000 Dane County Medical Society Sports Medicine Council
1985-1986 University of Wisconsin Department of Pediatrics Long Range Planning, Committee on Clinical Programs
1985-1987 University Hospital Ambulatory Care Committee's Subcommittee on Quality Assurance
1985-1988 Madison Chapter- American Coaching Effectiveness Program
1988-1994 **American Academy of Pediatrics, Committee on Sports Medicine and Fitness
1989-1995 *Wisconsin Interscholastic Athletic Association's Ad Hoc Committee on Minimum Weight Requirement for Wisconsin High School Wrestlers
1992 UW Pediatric Dept. Retreat Subcommittee on Education in General Pediatrics and Adolescent Medicine, co-chairperson
1990-1995 **National Joint Committee for Certificate of Added Qualification in Sports Medicine, one of two representatives from the American Board of Pediatrics, with representatives from the American Board of Family Practice, the American Board of Internal Medicine, and American Board of Emergency Medicine
1991 Madison Metropolitan School District Ad Hoc Committee on Fitness In Children and the Physical Education Curriculum
1991 Pediatric Department Retreat Committee on "Commitment to Care"
1991 Pediatric Department Committee on Secondary Net Income Distribution
1991-1994 **AMA Joint Review Committee on Education in Athletic Training, representative from the American Academy of Pediatrics.
1992-2017 Pediatric Department Committee on Research and Development Awards
1992-1994 Planning Committee, Annual U.W. Sports Medicine Symposium
1993-1997 Pediatric Department Computer Committee
1993-1995 **American College of Sports Medicine ad hoc Committee to rewrite position statement on "Weight Loss in Wrestlers"
1994 The Pediatric Department ad hoc Committee on parking
1994-1995 Program Committee, Great Lakes Athletic Trainers Association annual meeting
1995-2000 Ambulatory Care Committee, University Hospital
1996-2000 UW Medical Foundation Primary Care Task Force
1996-2000 UW Medical Foundation Long Range Planning Committee
1997 UW Hospital's Committee on Management of Care
1997 UW Hospital's Committee on Network Development
1997 UW Medical Foundation Task Force on Primary Care Compensation
1997-1998 UW Medical School, Planning Committee for Patient, Doctor and Society Course
1998-2000 **Program Committee, Advanced Team Physician Course, American Medical Society for Sports Medicine
1999-2005 **Board Member, National Athletic Trainers Association Research and Education Foundation
1999-2009 American Medical Society for Sports Medicine Foundation – Board of Directors
2000-2012 Department of Pediatrics Administrative Committee
2001 Department of Pediatrics Committee on PPlus Division reappointments

2001	Department of Pediatrics Internal Review Committee
2002	Department of Pediatrics Workgroup on primary care compensation
2002	Department of Pediatrics Educational Retreat Workgroup
2004-2007	U.W. Medical Foundation Operations Committee
2006-2007	U.W. Medical Foundation Operations Committee Subcommittee on Satisfaction (Patient and provider), Chair
2009-2012	U.W. Medical Foundation Primary Care Microsystems Steering Committee
2009-2012	Faculty Advisory Committee, U.W. Medical School, Chair 2009-2012
2010-2013	*State of Wisconsin Athletic Trainers Affiliated Credentialing Board
2010-2015	**American Board of Pediatrics, Committee on writing an examination for self - assessment in Sports Medicine
2011-2017	U.W. Medical Foundation Committee on Primary Care Compensation

LICENSURE:

1981-present Medical Licensure, State of Wisconsin

TEACHING RESPONSIBILITIES:

1983	Advanced Life Support Course for nurses Madison General Hospital "Advanced Life Support in Children".
1983-1985	Second year medical students "Exam of the Newborn", given annually.
1983-1986	Third year medical students: "Child Growth and Development" and "Infant Nutrition lectures given quarterly. Direct supervision of students in three half days per week in General Pediatrics Clinic.
1983-1995	Pediatric Nurse Practitioner Course N715.
	Dr. Memee Chun, Instructor. "Fever in Children" given annually 1983-1984, and "Sports Medicine", four lectures, annually.
1984-2017	Third year medical student pediatric clerkship, two half days in general pediatrics and one half day in sport medicine, weekly sessions throughout school year.
1984-1995	Pediatric residents, clinical supervision, Sports Medicine Clinic, two half days per week.
1984-2017	Pediatric, Family Practice and Internal Medicine residents, elective months in Sports Medicine, several per year.
1988-1996	Director, Fellowship in Adolescent and Sports Medicine
1996-2002	Associate Director, Fellowship in Adolescent and Sports Medicine
1996-2000	Small Group Leader, Generalist Partner Program Year I, Year II Wisconsin Medical School, name changed to Patient Doctor and Society 1998
1990, 1992, 1994	Primary Instructor for Physical Education 542-457
	"Medical Aspects of Exercise and Sports" 3 credits (Intercession), Lecturer 1996, 1998, 1999, semester II, 2001- present
1989 - 2004	Instructor for Pharmacology course for Pharmacy students "Anabolic Steroids"
1990 - 2016	Instructor for Pharmacology 717 (2nd year medical school course) "Anabolic Steroids"
1995-2016	Pediatric residents, clinical supervision, Sports Medicine Clinic, two half days per week.
2009-2017	Director, Adolescent medicine M4 elective
2010, 2012	Small group leader, Musculoskeletal Block, 2 nd year medical students

ARTICLES - NON-REFEREED:

1. Landry GL. "What is the Role of Pediatrician Within a Sports Medicine Program," Physician and Sports Medicine, 13(1):51-52, 1985.
2. Landry GL. "Patellofemoral Stress Syndrome - A Common, but Complex Problem," Comprehensive Therapy, 14(2):21-28, 1988.
3. Primos WA and Landry GL. "Fighting the Fads in Sports Nutrition," Contemporary Pediatrics, 6(9):14-50, 1989.
4. Landry GL, Primos WA, Jr. "Anabolic Steroid Abuse" Advances in Pediatrics, 39:185-205, 1990.

5. Landry GL, and Gomez JE. "Management of Soft Tissue Injuries" Adolescent Medicine: State of the Art Reviews. 2(1):125-140, 1991.
ARTICLES - NON-REFEREED, cont'd:
6. Landry GL, Allen DB. "Diabetes and Exercise" Clinics in Sports Medicine, 11(2):403-418, 1992.
7. Landry GL. "Sports Injuries in Childhood" Pediatric Annals, 21(3):165-168, 1992.
8. Landry GL. "HIV and Athletes" Sports Medicine Digest, 15(4):1-4, 1993.
9. Landry GL, Kokotailo PK. "Drug screening in the athletic screening," Current Problems in Pediatrics. Nov/Dec pp 344-359, 1994.
10. Bernhardt DT, Landry GL. "Sports injuries in children" Advances in Pediatrics, 42:465-500, 1995.
11. Thein LA, Thein JM, Landry GL. "Ergogenic Aids" Physical Therapy, 75:426-439, 1995.
12. Landry GL: "Working as a Volunteer Olympic Physician: A Chance of a Lifetime" Wisconsin Medical Journal, 8:552-554, 1996.
13. Koutures C, Landry GL. "The Acutely Injured Knee" Pediatric Annals, 1:50-55, 1997.
14. Johnson W, Landry G. "Nutritional supplements: Fact vs. Fiction" Adolescent Medicine: State of the Art Reviews, 9(3):501-514, 1998.
15. Metcalf TS, Landry GL. "Evaluation and Treatment of Back Pain in the Young Athlete" Clinics in Family Practice, 1(1):125-145, 1999.
16. Landry GL. "Treatment strategies for musculoskeletal injuries." Adolescent Update 14(2):1-8, 2002.
17. Landry GL. "Pediatric sports medicine" J Southeastern Soc Ped Dentistry 8(3):12-13, 2002.
18. Landry GL. "Management of concussions in athletes" Ped Clin No Am, 49:723-741, 2002.
19. Demorest RA, Landry GL. A football player with a concussion. Pediatric Case Reviews 3(3):127-140, 2003
20. Landry GL, "Ephedrine use is risky business," Invited commentary for Current Sports Medicine Reports 2:1-2, 2003.
21. Landry GL, Supplement roulette," Invited commentary for Current Sports Medicine Reports 4:1-2, 2005.
22. Landry GL, "Managing Concussions in Athletes" for Pediatric Pathways, a CME newsletter from American Family Hospital Fall 2012.
23. Meehan WP, Landry GL, "Tackling in Youth Football" AAP Council on Sports Medicine and Fitness, Pediatrics 2015;136(5):e1419-e1430

ARTICLES - REFEREED:

1. Katcher ML, Landry GL and Shapiro MM, "Use of a Liquid Crystal Thermometer in Tap Water Burn Prevention in the Office". Pediatrics, 83(5):766-771, 1989.
2. Graf BK, Lange RH, Fujisaki CK, Landry GL, Saluja RK. "Anterior cruciate ligament tears in skeletally immature patients: Meniscal pathology at presentation and after attempted conservative treatment. J Arthroscopic Rel Surg, 8(2):229-233, 1992.
3. Oppliger RA, Landry GL, Foster SA, Lambrecht A. "Bulimic Behaviors Among Interscholastic Wrestlers: A Statewide survey." Pediatrics, 91(4):826-831, 1993.
4. Gomez JE, Landry GL, Bernhardt DT. "Critical Evaluation of the Two Minute Screening Orthopedic Examination." AJDC 147:1109-1113, 1993.
5. Landry GL, Bernhardt DT, Helwig D, Darcey B. "Athletes test positive for morphine: A medical detective story," Phys Sportsmed 22(2):293-95, 1994.
6. Bernhardt DT, Landry GL. "Chest pain in the young athlete," Phys Sportsmed 22(6):70-82, 1994.
7. Stirling J, Landry GL. "Sports Medicine training during pediatric residency," Archives of Pediatrics and Adolescent Medicine 150:211-215, 1996.
8. Kokotailo PK, Koscik RE, Henry BC, Fleming MF, Landry GL. "Substance use and other health risk behaviors in collegiate athletes," J Clin Sport Medicine 6(3):183-9, 1996.
9. Kokotailo PK, Koscik RE, Henry BC, Fleming MF, Landry GL. "Health risk taking and human immunodeficiency virus risk in collegiate female athletes," J Am Coll Health; 46:263-68, 1998.
10. Oppliger RA, Landry GL, Foster SA, Lambrecht A. "Wisconsin minimum weight program reduces weight-cutting practices of high school wrestlers", Clin J Sport Med; 8(1):26-31, 1998.
11. Wojtys EM, Hovda D, Landry G, Boland A, Lovell M, McCrea M, Minkott T. "Concussion in Sports". Am J Sports Medicine 27(5): 676-687, 1999.

12. Bartok C, Schoeller DA, Clark RR, Sullivan JC, Landry GL: The effect of dehydration on wrestling minimum weight assessment. *Med Science Sport Exerc*; 36(1):160-167, 2004
13. Bartok C, Schoeller DA, Sullivan JC, Clark RR, Landry GL: Hydration testing in collegiate wrestlers undergoing hypertonic dehydration. *Med Science Sport Exerc*; 36(3):610-517, 2004
14. Albright JP, Powell JW, Martindale A, Black R, Landry G: Injury patterns in Big Ten Conference football. *Am J Sports Med* 32(6):1394-404, 2004.
15. DeMorest RA, Bernhardt DT, Best TM, Landry GL: Pediatric residency education: Is sports medicine getting its fair share? *Pediatrics* 115(1):28-33, 2005.
16. Putukian M, O'Connor FG, Stricker P, McGrew C, Hosey RG, Gordon SM, Kinderknecht J, Kriss V, Landry G: Mononucleosis and athletic participation: an evidence based review. *Clin J Sport Med* 18(4):309-15, 2008
17. Tegenkamp MH, Clark RR, Schoeller DA, Landry GL: Effects of covert subject actions on percent body fat by air displacement plethysmography. *J Strength Cond Res* epub April 2011 PMID 21499137
18. Difiori JP, Benjamin HJ, Brenner J, Gregory A, Jayanthi N, Landry GL, Luke A. Overuse injuries and burnout in youth sports: a position statement from the American Medical Society for Sports Medicine. *Clin J Sport Med*. 2014; 24(1):3-20.

ABSTRACTS:

1. Landry GL and Katcher, ML. "Use of a Liquid Crystal Thermometer in Tap Water Prevention in the Office". Presented before the Ambulatory Pediatrics Association, Epidemiology Section, San Francisco, California, 1984.
2. Winterstein AP, Landry GL and Traxel RK. "Unhealthy Weight Loss Practice's in High School Wrestlers". Presented before the National Athletic Training Association Annual Meeting, Columbus, OH, 1987
3. Landry GL. "Patellofemoral Stress Syndrome: A Common but Complex Problem," published in *Orthopedics/Rheumatology Digest*, 6:8-9, 1988.
4. Primos WA, Landry GL. "The Course of Splenomegaly in Infectious Mononucleosis." Presented before the Ambulatory Pediatric Association, Adolescent Medicine (Joint Session with APS/SPR) Anaheim, California, 1990.
5. Landry GL, Oppliger RA, Foster SA and Lambrecht. "Characteristics of Potential Bulimics Among High School Wrestlers." American College of Sports Medicine, Orlando, Florida, 1991.
6. Landry RV, Oppliger RA, Estwanik J and Landry GL. "Nutrition Knowledge and Weight Control Practices in Adolescent Wrestlers and Boxers - A Comparative Study." American College of Sports Medicine, Orlando, Florida, 1991.
7. Gomez J, Weatherly M and Landry G. "Dyspnea after Running." Physician Case for American College of Sports Medicine, Orlando, Florida, 1991.
8. Gomez JE, Landry GL, Bernhardt DT. "Critical Evaluation of the Two-Minute Screening Examination" American College of Sports Medicine, Dallas, TX, 1992.
9. Bernhardt DT, Landry GL, Ulery D. "Near-syncope in a twelve year old soccer player". American College of Sport Medicine, Seattle WA. 1993
10. Kokotailo PK, Henry BC, Kosick RL, Landry GL, Fleming MF. "Assessing risk - taking behavior in university athletes" Society for Pediatric Research, Seattle, Washington 1994.
11. Oppliger RA, Landry GL, Foster SA, Lambrecht AC. "Efficacy of rule change in high school wrestlers to reduce unhealthy eating behaviors." American College of Sports Medicine, Minneapolis, MN 1995.
12. Landry GL, Oppliger RA, Foster SA, Lambrecht AC. "Reduction of bulimic behaviors in high school wrestlers by a rule change." American Society for Sports Medicine. Hilton Head, SC 1995.
13. Williams CT, Landry GL, Graf BK. "Posterior sternoclavicular dislocation in a football player." Case Presentation: for American College of Sports Medicine, Cincinnati, OH 1996.
14. Bartok C, Schoeller DA, Clark RR, Sullivan JC, Landry G. "Effect of dehydration on minimal weight assessment. American College of Sports Medicine, St. Louis, MO 2002
15. Ehlenbach ML, Landry GL, Hokanson JS: Hypertrophic cardiomyopathy detected in a collegiate varsity athlete during a routine sports physical. Oral session on sports medicine and fitness, American Academy of Pediatrics, annual meeting, Washington D.C. 2005

LETTERS/BOOK REVIEWS:

1. Landry GL and Edmonson MB. "Attractive Method for Battery Removal" JAMA, 256(24):3351, 1986.
2. Landry GL. "AIDS and Sports," American Coach, Sept/Oct, 1988.
3. Landry GL. "Why Does Stretching Work for Growing Pains," , Contemporary Pediatrics, 6(9): 9, 1989.
4. Landry GL. Rebuttal to "Obesity in a High School Football Candidate: a case presentation. Medicine and Science in Sports and Exercise, 24(4):495-96, 1992.
5. Landry GL. "Stop tackle powder puff football: an open letter to juniors" Middleton Times Tribune 2000
6. Landry GL, book review for "Way To Go, Coach! A Scientifically Proven Approach to Coaching Effectiveness, 2nd edition, in Arch Pediatr Adolesc Med 156:1158, 2002.

CHAPTERS:

1. Landry GL. "Serious Infections in High School Athletes", chapter on hepatitis B and AIDS in Cases in Sports Medicine, Smith NJ, (ed.), WB Saunders, Co., 1989.
2. Landry GL. "Sports Medicine" chapter 39 in Principles and Practice of Pediatrics, Osaki, F (ed.) J.B.Lippincott, 1990.
- 2A. Landry GL. "Sports Medicine" Chapter for Principles and Practice of Pediatrics, Osaki F (ed), J.B.Lippincott, 2nd edition, 1994.
- 2B. Landry GL. "Sports Medicine" Chapter for Principles and Practice of Pediatrics, Osaki F (ed), J.B. Lippincott, 3rd edition, 1999.
- 2C. Landry GL. "Sports Medicine" Chapter for Principles and Practice of Pediatrics, Osaki F (ed), J.B. Lippincott, 4th edition, 2006.
3. Diekema DS, Landry GL. "Disturbances Due to Heat." Conn's Current Therapy, 1079-1082, 1991.
4. Kokotailo PK, Landry GL. "Drugs in Sports" Chapter 13 in Addictive Disorders, Fleming MF, Barry KL (eds). Mosby-Yearbook, pp. 249-259, 1992.
5. Coakley J, Donnelly P, Landry GL. Introduction to Sociological Perspectives, in Intense Participation in Children's Sports, Cahill BR, Pearl AJ (eds.), Human Kinetics Publishers, p 71-75, 1993.
6. Landry GL. "Exercise-induced urticaria and anaphylaxis," chapter in Sports Medicine Secrets, Mellion M (ed). Hanley R. Belfus, Inc., 1994.
- 6A. Landry GL. "Exercise-induced urticaria and anaphylaxis," chapter in Sports Medicine Secrets, Mellion M (ed). Hanley R. Belfus, Inc., 2nd edition, 1998.
- 6B. Landry GL. ". "Exercise-induced urticaria and anaphylaxis,"chapter in Sports Medicine Secrets, Mellion M (ed). Hanley R. Belfus, Inc., 3rd edition, 2003.
7. Landry GL. "The child athlete," in Annual of Sports Medicine, Lombardo JA (ed.), Current Medicine, Inc., 1994.
8. Landry GL. "Sports injuries," Ch. 16 Injury Prevention and Control for Children and Adults, third edit, American Academy of Pediatrics, Widome M, edit 1997.
9. Varner AE, Bush RK, Landry GL. "Football," in Allergic and Respiratory Disease in Sports Medicine, Weiler S, edit, Marcel Dekker, Inc. New York, Ch. 35,1997.
10. Landry GL, Bernhardt DT. "The athlete with epilepsy," Ch. 35, for Manual of Sports Medicine, Safran MR, VanCamp S, McKeag D, edit, Lippincott-Raven, Philadelphia pp. 299-304, 1998.
11. Landry GL: Benefits of sports participation. Ch. 1 in Care of the Young Athlete, Andy Sullivan and Steven Anderson, edits. American Academy Orthopedics and American Academy of Pediatrics, 2000.
12. Orenstein DM, Landry GL: Exercise, asthma and anaphylaxis. Ch. 22 in Care of the Young Athlete, Andy Sullivan and Steven Anderson, edits. American Academy Orthopedics and American Academy of Pediatrics, 2000..
13. Johnson W, Landry GL. Osgood-Schlatter Disease and Sindig-Larson-Johansson Disease, chapter for Essence of Office Pediatrics, James Stockman Jacob Lohr, edits., WB Saunders, 2001.
14. Landry GL: "Exercise induced anaphylaxis and urticaria. Ch 21 in Primary Care Sports Medicine, Garrett WE, Kirkendall DT, Squire DL, edits. Lippincott, Williams and Wilkins, pp261-264, 2001.
15. Taylor-Butler KL, Landry GL. "Principles of healing and rehabilitation. Ch. 26 in Pediatric Sports Medicine for Primary Care, edit Birrer RB, Greisemer, Cataletto MB, Lippincott Williams and Wilkins, 2002.
16. Johnson WA, Landry GL: "Sports and the Adolescent," Ch 219 in Pediatrics, Osborn, DeWitt, First, Zenel, edit. Elsevier Mosby Publishers, pp 1425-28, 2005

17. Logan K, Landry GL: Epidemiology and prevention of injuries, Ch 685 in Nelson Textbook of Pediatrics, edit Kliegman, Behrman, Jenson, Stanton, 18th edition 2007
18. Landry GL: Management of musculoskeletal injury, Head and Neck injuries, Heat injuries, Female athletes: Menstrual problems and risk for osteopenia, Ergogenic aids, and Specific sports and associated injuries. Chapters 686-691 in Nelson Textbook of Pediatrics, edit Kliegman, Behrman, Jenson and Stanton, 18th edition, WB Saunders, Co. 2007
19. Wilson JJ, Donnenwirth J, Landry GL: "Wrestling" chapter in Netter's Team Physician Handbook, Editors Madden, Putukian, McCarty, Young, Elsevier, Mosby Saunders, Publishing 2009.
20. Peterson A, Landry GL: Brachial plexus injuries. Ch. 23 in Pediatric Orthopaedics and Sports Injuries, Sarwark JF, LaBella CR editors. Am Academy of Pediatrics 2010
21. Landry, GL: Chapter 678 – Epidemiology and Prevention of Injuries, Chapter 679 – Management of Musculoskeletal Injury: 679.1 Growth plate injuries, 679.2 Shoulder injuries, 679.3 Elbow injuries, 679.4 Low back injuries, 679.5 Hip and pelvis injuries, 679.6 Knee injuries, 679.7 Lower leg pain: Shin splints, stress fractures, chronic compartment syndrome, 679.8 Ankle injuries, 679.9 Foot injuries, Chapter 680 Head and neck injuries, Chapter 681 Heat injuries, Chapter 682 Female athlete: Menstrual problems and the risk of osteopenia, Chapter 683 Performance enhancing aids, Chapter 684 Specific sports and associated injuries. In Section 2, Sports Medicine in Part 22 Bone and Joint Disorders. Nelson's Textbook of Pediatrics 19th edition, editors Kliegman, Stanton, Schor, Behrman. Elsevier Saunders, Philadelphia 2011
- 21A. Landry GL: Chapter 686 Epidemiology and Prevention of injuries, Chapter 690 Heat injuries, Chapter 691 Female athletes: Menstrual Problems and the Risk of Osteopeni. Nelson's Textbook of Pediatrics 20th edition, editors Kliegman, Stanton, Schor, Behrman. Elsevier Saunders, Philadelphia 2016
22. Landry GL: Elbow injuries and Foreword in Pediatric Sports Medicine: Essentials for Office Evaluation Kouteres C and Wong V, editors. Slack Inc 2014
23. Gomez JE, Landry GL: Being a team doctor. Chapter 1 in Adolescent Medicine:State of the Art Reviews on Sports Medicine and Sports injuries. edit Hergenroeder AC, Demorest RA. 2015;26:1-17.
24. Landry GL, Neilitz L: Paired organ loss. Chapter in The Sports Medicine Field Manual, an e-book American Orthopedic Society for Sports Medicine, Rosemont, Illinois, 2015

BOOK:

1. The Essentials of Primary Care Sports Medicine, Gregory L Landry and David T. Bernhardt, Human Kinetics Publishers, 2003, hardcover, pp.344

MONOGRAPH:

1. Landry GL. "AIDS and the Athlete". A pamphlet for coaches. Human Kinetics Publishers, 1988.
2. Landry RV, Oppiger RA, Shetler AC and Landry GL. "The Wrestler's Diet: A Guide to Nutrition and Weight Control," Quaker Oats Company, 1990.
3. Landry GL and Wagner L. "Anabolic Steroids, What's the Hype?" Wisconsin Clearinghouse, 1990.

MAGAZINE AND NEWSPAPER ARTICLES:

1. Landry GL. "Ask the Sports Doctor" column for "The Crossface" a Wrestling magazine.

"Herpes gladiatorium" 12/88	"Athlete's Response to Injury" 11/89
"Impetigo" 1/89	"Shoulder Separations" 12/89
"Influenza" 2/89	"Shoulder Dislocations," 1/90
"AIDS and the Athlete" 3/89	"The Burner," 2/90
"Injuries and Using Hot and Cold" 4/89	"Impingement Syndrome," 3/90
"Ankle Sprains" 6/89	"Hand and Wrist Injuries," 5/90
"Heat Illness" 7/89	"Concussions," 7/90
"Dehydration" 9/89	
2. Landry GL. "The Best Sports for Keeping Fit." "Healthy Kids" magazine, fall 1990.
3. Gomez JE, Landry GL. "How to Prevent Sports Injuries." "Healthy Kids" magazine fall 1991.
4. Landry GL. "AIDS and Athletes," "Sports Plus," spring, 1992.
5. Landry GL. "AIDS and Athlete," "The Point After," fall, 1993.

6. Landry GL. "The facts about athletes and asthma." "Sports Plus" spring 1994.
7. Landry GL. "Infectious mononucleosis in the athlete." "Sports Plus" fall 1997.

ROUNDTABLES:

1. Anderson S, Hellickson R, Landry G, Sossin K. "Training and nutrition for amateur wrestling" Sports and Science Roundtable, Gatorade Sports Science Institute, 11(3):1-4, 2000.
2. Rowland T. The Ascendancy of the Modern Athlete: A Virtual Roundtable (Participants – Landry GL, Malina R, Salvaterra G, Martin T, McKeag D, Schmidt P, Rundell K) Ped Exerc Science 14:11-117, 2002
3. Winterstein AP. The Athletic trainer-physician relationship. Athletic Training & Sports Health Care 2010;2(4):155-159. Participants: Winterstein AP, Landry GL, Bernhardt DT, Carr K.

AUDIOTAPES:

1. Dymert P, Strong W, Landry GL. Sports Medicine for the Pediatrician, AAP Pediatric Update, 1990.
2. Stricker P, Landry GL, Micheli L. Sports Medicine. AAP Pediatric Update 1997
3. Benjamin H, Landry GL, Congeni J: Sports Medicine in Pediatrics, George Washington University St Louis 2013

CRITICAL REVIEWER FOR:

1991-present	<u>Medicine and Science in Sports and Exercise</u>
1992-2005, 2009-present	<u>Physician and Sportsmedicine</u>
1992	<u>Pediatric Exercise Science</u>
1993	<u>American Journal of Biology</u>
1993-present	<u>Pediatrics</u>
1994-present	<u>Archives of Pediatrics and Adolescent Medicine</u>
2000-present	<u>American Journal of Sports Medicine</u>
2006-present	<u>Clinical Journal of Sports Medicine</u>

RESEARCH SUPPORT:

1989 Course of Splenomegaly in Infectious Mononucleosis", U.W. Medical School, Principal Investigator: G.L. Landry, Co-investigator.: W.A. Primos, \$12,000.00

1989-1991 "Weight Loss Habits in Wisconsin High School Wrestlers." UW Department of Pediatrics, Principal Investigator: GL Landry, Co-Investigator: RA Oppliger, \$3,800.00

1989 "Efficacy of a rule change in high school wrestling: The Wisconsin Minimum Weight Project." UW Department of Pediatrics, Principal Investigator: GL Landry, Co-investigator: RA Oppliger, \$3,150.00

1994 "Evaluation of serum markers for osteoporosis in amenorrheic athletes", UW Clinical Research Center, Principal Investigator: GL Landry, Co-Investigator: DT Bernhardt

2007 The reliability and responsiveness of various knee outcome scales in a young athletic population.
PIs: Greg Landry MD, Tim McGuire PhD LAT, Funding: \$2500 Sports Medicine Classic

INVITED PRESENTATIONS: (*regional **national)

1984 "Running Injuries", Pediatric Grand Rounds, Madison General Hospital, Madison, WI.
"Weight Loss and Gain in Athletes" and "Pre-Game Meal", Southern Wisconsin Coaches Workshop, University of Wisconsin Hospital, Madison, WI.
"Tap Water Burns", given with Murray Katcher, M.D., Pediatric Grand Rounds, University of Wisconsin Hospital, Madison, WI.
American College of Sports Medicine Exercise Physiology, Workshop, outside evaluator, Madison General Hospital, Madison, WI.
"Organization of Medical Coverage for Athletic Events", Seventh Annual Sports Medicine Symposium, Waunakee, WI.
"Treatment of Anaphylaxis Using the Bee Sting Kit", University of Wisconsin athletic trainers in service, U.W. stadium, Madison, WI.
"Winning Isn't the Only Thing: Stress in Athletes", Pediatric Health Care in the 80's, University Hospital, Madison, WI.

*"Controversies in Pre-participation Athletic Physicals", Fox River Valley Academy of Medicine, Appleton, WI.

"Care and Treatment of Injured High School Athlete", Injury Clinic for Coaches, University Hospital, Madison, WI.

1985 "Common Sports Injuries", Madison School Nurses, Madison, WI.

"The Acutely Injured Ankle", Pediatric Primary Care Conference, University Hospital, Madison, WI.

"Athletic Practice and Competition in the Face of Common Medical Problems", Southern Wisconsin High School Coaches, Workshop #1, Lodi, WI.

"Athletic Practice and Competition in the Face of Common Medical Problems", Southern Wisconsin High School Coaches, Workshop #2, LaFollette High School, Madison, WI.

"The Acutely Injured Knee", Pediatric Primary Care Conference, University Hospital, Madison, WI.

"Medical Problems in Female Endurance Athletes", Pediatric Grand Rounds, Madison, WI.

"Youth Sports for Girls" Workshop Time Out: A Conference for Coaches of High School Girls, Concourse Hotel, Madison, WI.

"Common Athletic Shoulder Injuries" Pediatric Primary Care Conference, University Hospital, Madison, WI.

"Competition in the Face of Common Medical Problems" "Medical Problems in the Female Endurance Athlete", Eighth U.W. Sports Medicine Symposium, Madison, WI.

"The Pre-Sports Evaluation", Pediatric Primary Care Conference, University Hospital, Madison, WI.

"The Acutely Injured Ankle in the Athlete", Family Practice Seminar, St. Mary's Hospital Primary Care, Madison, WI.

The Acutely Injured Ankle in the Athlete", Pediatric Grand Rounds, Madison General Hospital, Madison, WI.

"Athletics . . . What Problems Can You Play With?", Wisconsin Statewide CME Teleconference, University Hospital, Madison, WI.

"The Acutely Injured Ankle", "The Acutely Injured Knee", Workshop on Sports Injuries, Annual Seminars in Pediatrics, University Hospital, Madison, WI.

"The Acutely Injured Knee", Internal Medicine Resident Seminar, University Hospital, Madison, WI

"Strength and Conditioning, Evaluations", U.W. Sports Medicine and Fitness Center Open House, Madison, WI

"The Acutely Injured Ankle", Internal Medicine Resident Seminar, University Hospital, Madison, WI.

1986 "Back Pain in Children", University Hospital Pediatric Primary Care Conference, University Hospital, Madison, WI.

University of Wisconsin athletic training staff in-service, The Athlete with Diabetes Mellitus", U.W. Stadium, Madison, WI.

"Sports Dermatology", "Drugs in Sports" A Panel Discussion, Ninth Annual Sports Medicine Symposium, Madison, WI.

"Pre-sports Participation Evaluation," Pediatric Grand Rounds, Madison General Hospital, Madison, WI.

"Injury Prevention and Treatment", Madison Soccer Coaches association Meeting, Madison, WI.

"The Acutely Injured Knee", Family Practice Grand Rounds, St. Mary's Hospital, Madison, WI.

"Medical Illnesses in Athletes", CME course on Emergency Care Problems, Sheraton Inn Hotel, Madison, WI.

"Sports & Sports Injuries", conference for parents, University Hospital, Madison, WI.

"Drug Testing", Heitzinger & Assoc. Conference on Drug Abuse Concourse Hotel, Madison, WI.

"Drugs in Sports", CME conference for Beaver Dam community physicians, Beaver Dam, WI.

"Chondromalacia" Seminars in Pediatrics, University Hospital, Madison, WI.

"Marfan Syndrome", U.W. athletic training staff in-service, U.W. Stadium, Madison, WI.

"Examination of the Acutely Injured Knee," CME Statewide teleconference, University Hospital, Madison, WI.

*"Sports Readiness", Wisconsin Association of Pediatric Nurse Associates and Practitioners, Holiday Inn, Wisconsin Dells, WI.

"Acute Knee Injuries", Rheumatology conference, Veterans Administration Hospital, Madison, WI.

Six lectures: "Diabetic control in Athletes," "Drug Use and Abuse by Athletes," "Exercise Induced Asthma," "Upper Respiratory Tract Infections in Athletes," "Infectious Mononucleosis in Athletes," and "Skin Infections in Athletes" U.W.-Madison CME "New

"Therapeutics" conference, Lakewoods Resort, Cable, WI.
"Drug Testing Athletes: The U.W. and Beyond", Dane County Sports Medicine Council, Dean Clinic, Madison, WI.
"Ethical Issues in Sports Medicine," U.W. athletic training in-service, U.W. Stadium, Madison, WI.
"The Acutely Injured Knee," Pediatric Primary Care Conference, University Hospital, Madison, WI.
"Drug Testing Collegiate Athletes: Administrative and Ethical Issues" Panelist for "Ethical issues in Sports", Tenth U.W. Sports Medicine Symposium, Sheraton Inn, Madison, WI.
"Use of Anabolic Steroids in Athletes," Strength Training Clinic, U.W.-Stevens Point, Stevens Point, WI.
**"Use of Anabolic Steroids in Athletes," two lectures, CME conference for community physicians and for coaches clinic, Lima Community Hospital, Lima, OH.
"Implications of Drug Testing Athletes: The U.W. Experience and Beyond," Wisconsin Association for Health, Physical Education, Recreation and Dance, Memorial H.S., Madison, WI.
"Pre-participation Health Evaluation for Competitive Sports," Annual Seminars in Pediatrics, University Hospital, Madison, WI.
"Anabolic Steroid Use in Athletes: Is Bigger Better?" Pediatric Grand Rounds, University Hospital, Madison, WI.
"Steroid Use in High School", Injury Clinic for Coaches, University Hospital, Madison, WI.
"Anabolic Steroids", Annual Podiatry Conference, Inntowner Motel, Madison, WI.
"Anabolic Steroids in Athletes", Wisconsin State High School Football Coaches Association Annual Meeting, Concourse Hotel, Madison, WI.
"Hepatitis B and AIDS in the Athlete", Eleventh annual UW Sports Medicine Symposium, Concourse Hotel, Madison, WI.
"Pediatric Sports Injuries", Emergency Medical Technicians Annual Conference, Wisconsin Center, Madison, WI.
"Anabolic Steroids in Athletes", UW Hospital Physical Therapy In-Service, Madison, WI.
"Highlights of the 1988 Ambulatory Pediatric Association Meeting", Pediatric Grand Rounds, University Hospital, Presented with M. Bruce Edmonson, M.D., and Peter Karofsky, M.D., Madison, WI.

1988
"Anabolic Steroids", U.W.-Hockey Team, Madison, WI
"Anabolic Steroids", Pediatric Grand Rounds, Madison General Hospital, Madison, WI
**"Anabolic Steroids", Workshop on "Sports Medicine - Acute Injuries to the Lower Extremity", Topics in Pediatrics, Orlando, FL
"Maturity and Sports Participation", A Conference for Coaches, sponsored by the Dane County Sports Medicine Council, Memorial High School, Madison, WI
"Exercise-Induced Asthma" and "The Female Athlete", Great Lakes Athletic Trainers Association, Green Bay, WI
"Anabolic Steroids", Brodhead Middle School and High School Spring Athletes, Brodhead High School, Brodhead, WI
"Coverage of Athletic Events", Lakeland Hospital, Beaver Dam, WI
"Anabolic Steroids" Panel Moderator, Presented with four ex-UW-Madison athletes, McClain Athletic Facility, Madison, WI
"Workshop on "Sports Medicine for the Pediatrician", Ambulatory Pediatric Association, Washington, D.C.
"Exercise-Induced Asthma", Twelfth U.W. Sports Medicine Symposium, Concourse Hotel, Madison, WI.
Invited Speaker, "Anabolic Steroid Abuse in Athletes", UW-System Alcohol and Other Drug Conference, Eau Claire, WI.
"Pre-participation Evaluations", Dane County Sports Medicine Council, Teacher/Coach Workshop, Madison, WI.

1989
"A Clinical Approach to Ankle Injuries", Richland Medical Center, Richland Center, WI.
"The Acutely Injured Knee", Family Practice Grand Rounds, St. Mary's Hospital, Madison, WI.
"Athletic Drug Abuse", Freeport Memorial Hospital, Freeport, IL
"Head Injuries in Athletes", "Fitness Evaluations in the Office", Thirteenth U.W. Sports Medicine Symposium, Holiday Inn West, Madison, WI.
"Exercise Induced Asthma", "The Pre-participation Evaluation", University of Kentucky Sports Medicine Symposium, Lexington, KY.

"Running Injuries" a workshop for the Ambulatory Pediatric Association Annual Meeting, Anaheim, CA

1991 "Shin Splint Syndrome", Pediatric Seminars, U.W. Hospital, Madison, WI
***"Pre-participation Evaluation", "Acutely Injured Ankle", "Drugs in Sports", "Intense Training and Participation in Youth Sports", Vail Sports Medicine Conference, Vail, CO
"Sports Participation in Youth", Jefferson Middle School Parent Group, Madison, WI
"Exercise Induced Asthma" and "Head Injuries in the Athlete", Fourteenth UW Sports Symposium, Madison, WI
"Anabolic Steroids", Memorial High School, Madison, WI
"Asthma and the Athlete", St. Paul Children's Hospital, St. Paul, MN
"Anabolic Steroids", Midwest Toxicology Society Meeting, Chicago, IL
"Anaphylaxis", UW Sports Medicine Staff In-Service, U.W. Stadium, Madison, WI
"Drugs In Sports", Coaches In-Service, UW Sports Medicine Clinic, Madison, WI
"Medical Coverage of Athletic Events", Grand Rounds, Minneapolis Children's Hospital, Minneapolis, MN
"Medical Coverage of Athletic Events", Dane County Sports Medicine Society, Dean Medical Center, Madison, WI
"Medical Coverage of Athletic Events", Pediatric Grand Rounds, University Hospital, Madison, WI
"Head Injuries in Athletics", "Case Discussion: Asthma", Fifteenth UW Sports Medicine Symposium, Holiday Inn West, Middleton, WI
**General Medical Case Presentations, "consultant", American College of Sports Medicine Annual Meeting, Dallas, TX
"AIDS and the Athlete", Central Wisconsin Claims Association, Avenue Bar, Madison, WI
"Covering the Winter Olympics" for Career Day, Memorial High School, Madison, WI
***"Injuries to the Growth Plates", National Athletic Trainers Association Annual Meeting, Denver, CO
**"The Acutely Injured Knee", CME conference, Hartford Hospital, Hartford, WI
***"Exercise Induced Anaphylaxis and Asthma", American Medical Society for Sports Medicine, San Diego, CA
**"Injuries to the Growth Plates", Gundersen Clinic, La Crosse, WI
***"The Acutely Injured Ankle", American Academy of Pediatrics Interim Forum on Sports Medicine, San Francisco, CA
"Injuries to the Growth Plates", Pediatric Seminars, Madison, WI
"Coverage of the Winter Olympic Games", Madison Nordic Ski Club, Madison, WI
***"Medical Coverage of Athletic Events", University of Chicago CME Course, Chicago, IL
"Epidemiology of Sports Injuries", "Weight Lifting in Children", "HIV Infection in Athletes", ASCM Team Physician Course, Orlando, FL
"The Acutely Injured Knee", Pediatric Grand Rounds, Racine, WI
"Injuries to the Growth Plate", "The Acutely Injured Knee", "Medical Coverage of Athletic Events", Issues and Advances in Pediatrics, University of South Florida, Tampa, FL
"Anterior Knee Pain in the Adolescent", Alex Iams/Charles Geppert Memorial Lecture, St. Mary's Medical Center, Madison, WI
"Anterior Knee Pain in the Adolescent", Progress in Pediatrics CME Program, University Hospital, Madison, WI
"Youth Sports", YMCA Regional Meeting, University Hospital, Madison, WI
**"Pre-participation Evaluation", Wisconsin Pediatric Nurse Practitioners Annual Meeting, Waukesha, WI
"Head Injuries: On the Field Evaluation and Criteria for Return", "Anabolic-androgenic steroids-An update", Seventeenth Annual U.W. Sports Medicine Symposium, Holiday Inn West, Middleton, WI
***"Injuries to the Young Athlete", Second Annual Meeting, American Medical Society for Sports Medicine, Sun Valley, ID
"Skiing Injuries", UW Emergency Services Conference, Wisconsin Center, Madison, WI
**"HIV and the Athlete", Annual Wisconsin Conference on HIV/AIDS, Holiday Inn West, Middleton, WI
**"Anterior Knee Pain in the Adolescent Athlete", Annual CME Outreach Seminar, Holiday Inn, Appleton, WI
"Assessing Fitness in the Office Setting", "The Acutely injured Knee", "Assessment of Body

Composition", "Rehabilitation Techniques", Annual Meeting of New Mexico State Pediatric Society, Rio Doso, NM

**"Assessing Fitness in the Office", Panelist for American Academy of Pediatrics Section on Sports Medicine & Fitness, Annual AAP Meeting, Washington, D.C.

1994 ***"The Acutely Injured Knee" "The Acutely Injured Ankle", Two two hour sessions for National Association of Pediatric Nurse Practitioners Annual Meeting, Chicago, IL

"Sports Medicine and the Olympics", Madison Memorial High School Humanities Day, Madison, WI

"The Acutely Injured Knee", Richland Center Medical Center CME Conference, Richland Center, WI

"Exercise-Induced Asthma" and "Case presentation: Thirty pound weight loss in a male soccer player", U.W. Sports Medicine Symposium, Middleton, WI

"Children's Overuse Injuries" and "Hip and Pelvis Injuries" Case Presentations, expert panel member American College of Sports Medicine Annual Meeting, Indianapolis, IN

"The Acutely Injured Ankle", CME Conference for Sauk Prairie Hospital, Sauk Prairie, WI

Invited Participant, "Exercise-Induced Asthma Summit", United States Olympic Center, Colorado Springs, CO

1995 "Anterior Knee Pain", University Health Service, UW Madison, Madison, WI

"Anabolic steroids," "Head injuries," "Medical Case study," Eighteenth annual UW Sports Medicine Symposium, Holiday Inn, Middleton, WI

"Anabolic-androgenic Steroids" for U.W. Summer Institute on Pharmacology of Psychoactive Drugs, Grainger Hall, Madison, WI

"Pre-participation Evaluation", Canadian Pediatric Society, Montreal, Canada

"Determining Playability - a Panel Discussion", American Medical Society for Sports Medicine, Hilton Head, S.C.

"Anabolic Steroids", UW Football Team, Middleton, WI

"The Pre-participation Sports Evaluation", Sheboygan Hospital, CME Conference, Sheboygan, WI

"Taking a History", UW Athletic Trainers Inservice, Madison, WI

"The Participation Sports Evaluation", "Running Injury Cases". Two Workshops on Musculoskeletal Exams, University of Massachusetts, Kroc Visiting Professor, Worster, MA

1996 "Sports Medicine as a Career", Brodhead High School Career Day, Brodhead, WI

"Risk Taking and the Athlete", UW Athlete Frosh Seminar, Madison, WI

"Ankle Injuries", Watertown Hospital CME, Watertown, WI

"Sports Medicine as a Career", Edgewood High School, Madison, WI

"Exercise Induced Asthma", Great Lakes Athletic Trainer Association, Middleton, WI

"Mild Brain Injuries in Children", "Cardiovascular Considerations for Children in Sports", Pediatric and Adolescent Sports Medicine, U.C. San Diego Children's Hospital, San Diego, CA

"Running Injuries", University Health Service, Madison, WI

"Running Injuries", Meriter Hospital Grand Rounds, Madison, WI

"Injuries in Dancers", Turning Point Ballet School, Madison, WI 4/21

"Knee Injuries", A Workshop for the AAP Spring Session, with Steve, Anderson M.D., Chicago, IL

"Infectious Mononucleosis", "Medical Coverage of Sports Events", "Case presentation", Nineteenth annual UW Sports medicine Symposium, Concourse Hotel, Madison, WI

"Sports Medicine as a Career", Memorial High School, Madison, WI

"Anterior Knee Pain", "Acute Shoulder Injuries", "Examination of the Extremities-A Workshop", Indiana University Pediatric CME Course, Indianapolis, IN

"Eye Injuries", Medical Aspects of Exercise and Sport, Madison, WI

"Anabolic Steroids", Summer Institute for AOD, Madison, WI

1997 "Life Outside Medicine", Panel Discussion for Medical Students, Madison, WI

"Anabolic Steroids", Dept. of Kinesiology "Brown Bag" Seminar, Madison, WI

"Decision Analysis", 2nd Year Medical Student Generalist Partner Program Course, Madison, WI

***"A Case of Bradycardia", "Presidential Address", Annual Meeting, American Medical Society for Sports Medicine, Colorado Springs, CO

"Drug Testing", "Medical Case Presentation", Twentieth annual UW Sports Medicine Symposium, Middleton, WI

**"The Pre-participation Evaluation", "Workshop on Knee/Ankle Examination", Medical College of Georgia, Augusta, GA

***"Exercise Induced Asthma", National Meeting, American College of Sports Medicine, Denver, CO

"Anabolic Steroids", Summer Drug Abuse Institute, Madison, WI

"Drugs and Drug Testing", Pen and Mike Club, Madison, WI
"Pediatrics as a Career", Panelist, M2 Career Day, Madison, WI
**Top Ten Overuse Syndromes in Young Athletes", "Concussions in Young Athletes", "Examination of the Knee and Ankle", American Academy of Pediatrics Annual Meeting, New Orleans, LA
*"Age-appropriate Programming", Wisconsin Parks and Recreation, Middleton, WI
"Running Injuries", Sauk Prairie Hospital CME Course, Sauk Prairie, WI
"When Do You Refer to a Doctor", Sports Medicine Center Brown Bag Seminar, Madison, WI
"Healthy and Unhealthy Weight Loss and Gain", UW Conference on Nutrition, Middleton, WI
"Management of Concussions", "Anabolic Androgenic Steroids"
**Overuse Injuries in Young Athletes", Workshops: "Examination of the Knee", "Examination of the Ankle", Case Presentations: "You be the Sports Doc", Dartmouth Annual Pediatric Conference, Waterville Valley, NH
*"Management of Concussions in Athletes", "Top Ten Overuse Injuries in Pediatric Sports Medicine", Duke University, Raleigh-Durham, NC
"Concussions: Guidelines vs Practical Experience", Case Studies: Foot Pain in a Runner, Shin Pain in a Runner", Twenty-first annual UW Sports Medicine Symposium, Madison, WI
"Infectious Mono and the Athlete", Richland Center Medical Center, Richland Center, WI
***"Weight Loss in Wrestling: Dying to Win", American Medical Society for Sports Medicine exchange lecturer for the American Orthopedic Society for Sports Medicine Annual Meeting, Vancouver, B.C.
"Anabolic Steroids" for course on Gender Issues and Addiction, UW Summer Institute, Madison, WI
"Weight Loss in Wrestling: Dying to Win", U.W. Pediatric Grand Rounds, Madison, WI
"Weight Loss in Wrestling: Dying to Win", U.W. Orthopedics Visiting Professor Day, Madison, WI
"Anabolic-androgenic Steroids and Other Supplements", Pharmacology Course for 2nd year medical students, Madison, WI
"Approach to Adolescents", Patient, Doctor & Society Course for 1st year medical students, Madison, WI
***"Creatine and Other Supplements", "The Pre-participation Sports Evaluation", "Anterior Knee Pain", "Running Injury Cases", "Injuries to the Growth Plate," CME Course for California chapter of the American Academy of Pediatrics, Maui, Hawaii
"Wrestlers and Weight Loss: Dying to Win", Twenty-second annual U.W. Sports Medicine Symposium, Madison, WI
"Creatine and Other Supplements", CME Course for U.W. Dept. of Pediatrics, Madison, WI
**"Concussions", Exchange speaker for the American Medical Society for Sports Medicine, presented to the American Orthopedic Society for Sports Medicine annual meeting, Traverse City, MI
"Anabolic Steroids" lecture for U.W. summer course on Gender Issues & Addiction, Madison, WI
**"Anterior Knee Pain", Great Lakes Society for Adolescent Medicine, Lake Geneva, WI
"Infectious Mononucleosis", CME Statewide teleconference, Madison, WI
***"Wisconsin Weight Loss Program Makes Wrestlers Healthier—A Debate" (Pro) U.W. Wrestling Symposium, Middleton, WI
***"Epistaxis", "Readiness for Sports Participation", "Healthier Weight Loss and Weight Gain in Athletes", "Skin Infections: Prevention & Treatment", "Branchial Plexus Injuries", Advanced Team Physician Course, sponsored by 3 societies: AMSSM/AOSSM/ACSM, Phoenix, AZ
"Management of concussions," weekly sports medicine conference, Madison, WI
"Anabolic-androgenic Steroids and Other Supplements", Pharmacology Course for 2nd year medical students, Madison, WI
"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison, WI
"Evaluation of the acutely injured ankle," "Creatine, androstenedione and other supplements,"
**"Running injury cases: You be the sports doc," "Anterior knee pain in young athletes," Phoenix Children's Hospital Pediatric Update 2000, Scottsdale, AZ
**"Management of concussions," "What's a shin splint? And what isn't," "Creatine, androstenedione and other supplements," "Running injury cases: You be the sports doc," Combined Southern California Pediatrics Postgraduate Meeting, Palm Springs, CA
"Cerebral concussion," Twenty-third annual UW Sports Medicine Symposium, Middleton, WI
**"Creatine, androstenedione and other supplements," "The Acutely injured knee," "Management of concussions in athletes," Blank Children's Hospital 43rd annual Pediatric Spring conference, Des Moines, IA

***"Performing enhancing supplements: A debate of the pros and cons." "The Acutely injured knee," "Concussions:controversial cases: A panel discussion," "Common cases in the office: You be the sports doc." American Academy of Pediatrics' Pediatrics and Adolescent Medicine Course, Lake Tahoe, CA

"Anabolic Steroids" lecture for U.W. summer course on Gender Issues & Addiction, Madison, WI

**"Examination of the knee - a workshop" UW Seminars in Pediatrics, Middleton, WI

***"Should supplements, especially creatine, be dispensed in the lockerroom?" A debate" Repeated Concussions," Cases of performance anxiety, "Tattoos and body piercing", "Hypothermia," Advance Team Physician Course, AMSSM/AOSSM/ACSM, Orlando, FL

2001

**"Management of concussions in athletes" Portage Hospital CME Program, Portage, WI

**"Management of concussions," "Creatine and other supplements: More home runs for everyone?" David S. Smith visiting professor, St. Christopher's Hospital for Children, Philadelphia, PA

**"Management of concussions," "Top Ten Acute Injuries in Young Athletes," visiting professor, Baystate Medical Center, Springfield, MA

***"Creatine and other supplements: More home runs for everyone?" "Examination of the knee and shoulder: A workshop x 2," American Academy of Pediatrics' Armed Forces annual meeting, Louisville, KY

2002

"Anabolic-androgenic Steroids and Other Supplements", Pharmacology Course for 2nd year medical students, Madison, WI

"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison, WI

* "Top ten sports injuries in Pediatrics," "Anabolic steroids and creatine supplements," "Management of concussions in athletes," for: Advances in the Practice Pediatrics, sponsored by San Diego Children's Hospital, San Diego, CA

*"Why the primary care doc is a good team physician," "Infectious mono and the athlete: When is it OK to return to play?" "Using your head: Management of concussions in athletes," "Top ten sports injuries in Pediatrics," Practical Pediatrics Sports Medicine Conference, SSM Cardinal Glennon Children's Hospital, St. Louis, MO.

*"Common sports injury evaluation in a busy office setting" for "Adolescent Update" Wisconsin Chapter of the American Academy of Pediatrics annual meeting, Wisconsin Dells, WI.

*"Head Injuries in athletes: On the field evaluation and criteria for return to competition." CME conference for Mercy Health System, Janesville, WI

*"Anterior knee pain in young athletes: What you need to know." "Top ten sports injuries in Pediatrics," "Building up your knowledge of creatine and anabolic steroids." "Management of concussions in athletes: Heads up!" Vermont Summer Seminar, Manchester, VT.

2003

***"Pediatric aspects of medical management and chronic illnesses and the young athlete" Symposium for American Academy of Orthopedic Surgeons, New Orleans, LA.

***"Athletes and creatine: More home runs for everyone?" "Top ten sports injuries in young athletes: A case-based discussion." 52nd Annual Update in Pediatrics, St. Christopher's Children's Hospital, Philadelphia, PA

***"Nutritional supplements: More home runs for everyone? American Academy of Pediatrics Super CME Course, Chicago, IL

"Drugs and sports" Madison Sports Hall of Fame, Madison, WI

*"Management of concussion in athletes" "What is a shin splint and what isn't" "Anabolic androgenic steroids" "Top ten sports injuries in young athletes" 14th annual Las Vegas Postgraduate meeting, California Chapter 2 AAP meeting, Las Vegas, NV

***"Children and obesity" The David Hough lecture, American Medical Society for Sports Medicine annual meeting, San Diego, CA

***"Sympathomimetic drugs in sports" "Medical cases: Two orbital blowout fractures in cheerleaders" UW Annual Sports Medicine Symposium, Madison, WI

***"Creatine and other supplements: More home runs for everyone? "The acutely injured knee" "Management of concussions in athletes." Riley Children's Hospital annual Child Care Conference, Indianapolis, IN

*"Management of concussions in athletes: Heads up!" "The pediatrician as a team physician"
"Creatine and other supplements" and "Top ten sports injuries in pediatric sports medicine." 26th
annual Black Hills Seminar on Advances in Pediatrics, Rapid City, S.D.
"Adolescent boys and steroid abuse" U.W. summer program for teachers. Mental Health Issues
Facing Adolescents. Madison, WI

2004
"Athletic head and neck injuries: Sideline evaluations and management," "Stress fractures," for
Current Concepts in Primary Care Sports Medicine, University of Chicago, Chicago IL
"Running injuries," for "Headhunters" triathlete group month meeting, Meriter Hospital, Madison, WI
* "Did the bell ring? Concussions and athletes," "When good knees seem bad," "Managing Mono,"
and two workshops: "Examination of the shoulder" and "Examination of the ankle." Presented at the
American Academy of Pediatrics Pediatric and Adolescent Medicine Course, Monterey, CA
"Is playing soccer harmful to a child's brain?" for 27th annual U.W. Sports Medicine Symposium,
Madison, WI
"The acutely injured ankle," for the pediatric resident core conference, U.W. Hospital, Madison, WI
* Discussant for cases on "ligament and chondral injuries – knee." American College of Sports
Medicine, Indianapolis, IN

2005
"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison,
WI
**"Athletic head and neck injuries: Sideline evaluations and management," "Stress fractures" for
Current Concepts in Primary Care Sports Medicine, University of Chicago, Chicago, IL
**Fitness education in medical schools and residencies" For one day summit on "Increasing youth
physical activity: Strategies in science, health care, and fitness and sports" American College of Sports
Medicine annual meeting. Nashville, TN
**Shoulder injuries" Chair of clinical case slide presentations American College of Sports Medicine,
Nashville, TN
"Post-concussion syndrome" 28th annual U.W. Sports Medicine Symposium, Madison, WI

2007
"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison,
WI
"Anabolic androgenic steroids," Pharmacology course for 2nd year medical students, Madison, WI
"Management of concussions" U.W. CME Portage Hospital, Portage, WI
* "Concussions: Are the guidelines changing?" "Neck injuries" Sports Medicine Symposium,
University of Chicago, Chicago, IL
"Anabolic androgenic steroids and creatine" UW undergraduate course "Genetics and athletics"
Madison, WI
"Age-appropriate recommendations for exercise," Promoting Childhood Fitness: A community
approach, Madison WI
* "Heads up! A concussion discussion." The acutely injured knee" "Pitfalls in sports medicine ""You
be the sports doc: Case presentations." Two workshops Vermont Summer Pediatric Seminar,
Vermont University Medical School, Manchester Village, Vermont.
**"Creatine: OK to use or not?" Sports Medicine Section meeting, American Academy of Pediatrics
National Conference and Exhibition, San Francisco, CA

2008
"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison,
WI
"Anabolic androgenic steroids," Pharmacology course for 2nd year medical students, Madison, WI
"Concussions: Are the guidelines changing?" "Cervical spine injuries" University of Chicago
Sports Medicine Symposium, Chicago, IL
***"Medical aspects of sports medicine II" American Orthopedic Society for Sports Medicine Board
review course. Chicago, IL
"Concussions: An update" U.W. Sports Medicine Conference, Middleton, WI
"Concussions: An update" U.W. Orthopedic Grand Rounds, Madison, WI
"Drug Testing Athletes" U.W. Sports Medicine weekly conference, Madison, WI

2009	<p>**"Playability: A round table" Cases on stingers and MRSA Sports Medicine Section meeting, American Academy of Pediatrics National Conference and Exhibition, Boston, Mass</p> <p>"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison, WI</p> <p>"Anabolic androgenic steroids," Pharmacology course for 2nd year medical students, Madison, WI</p> <p>"Top Ten sports injuries: You be the sports doc." U.W. Sports Medicine Symposium, Middleton, WI</p> <p>"Extrication of the spine injured athlete - introduction" Inservice for Madison Paramedics, U.W. Athletic Department, Madison, WI</p>
2010	<p>***"Medical aspects of sports medicine II" American Orthopedic Society for Sports Medicine Board review course. Chicago, IL</p> <p>Concussions in athletes: An Update" Pediatric Grand Rounds, Madison, WI</p> <p>*"Creatine and anabolic steroid use in athletes" Green Bay, WI</p> <p>***"Managing concussions in athletes," "Assessing the injured shoulder," "Creatine and other supplements" and two workshops on "Pitfalls in Sports Medicine." American Academy of Pediatrics Practical Pediatrics course, Breckenridge, CO</p> <p>"What is a shin splint" CME lecture, Portage WI</p> <p>"Anabolic steroids in athlete" Endocrinology Grand Rounds, Madison, WI</p> <p>* "Creatine and other supplements" CME for University of Wisconsin-Whitewater, Whitewater, WI</p> <p>*"Running injuries" and "the acutely injured ankle" Wisconsin Nurse Practitioners annual conference, Wisconsin Dells, WI</p> <p>*"Concussions in athletes," "Creatine and other supplements," "Anterior knee pain in young athletes" and two workshops on "Top Ten Sports Injuries in Young Athletes." Summer Pediatric Seminar, University of Vermont, Manchester VT</p> <p>*"Concussions in athletes," "The acutely injured knee," "Anterior knee pain in athletes," Creatine and other supplements," 3 workshops on " Top Ten Sports Injuries" California chapter of the AAP, Clinical Pearls, Maui, HI</p> <p>***"Medical aspects of sports medicine II" American Orthopedic Society for Sports Medicine Board review course. Chicago, IL</p> <p>Musculoskeletal issues: Exam of the knee. Friday afternoon conference (2 hours) for all pediatric residents at UW , Madison, WI</p> <p>"Infectious mononucleosis and the athlete." CME conference of University Health Service, Madison, WI</p> <p>"Drug testing and the athlete." Friday am Sports Medicine conference Madison, WI</p> <p>*"Concussions in athletes," "Evaluating the injured shoulder," "Creatine and other supplements," and two workshops on Top Ten Sports Injuries in young athletes." California chapter of the AAP, Las Vegas Seminars, Las Vegas, NV</p> <p>"Managing concussions in athletes." Orthopedic Grand Rounds, Madison, WI</p> <p>"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison, WI</p> <p>"Hip case" and "Hockey player with a stinger" U.W. Sports Medicine Symposium</p> <p>**"Hip case" and "Doctor, My child walks funny" American Medical Society for Sports Medicine, Salt Lake City, Utah</p> <p>"Concussions in athletes" undergraduate student class on sociology of sports</p> <p>***"Medical aspects of sports medicine II" American Orthopedic Society for Sports Medicine Board review course. Chicago, IL</p> <p>"Managing concussions in children and adolescents" Seminars in Pediatrics Madison, WI</p> <p>"Depression and anxiety cases." With Dr. William Taft Friday afternoon conference (2 hours) for</p>
2011	<p>all pediatric residents at UW, Madison, WI</p> <p>"Concussions in athletes." Friday am Sports Medicine conference Madison, WI</p>

"Update
and

"Concussions in athletes" monthly CME conference, Portage hospital, Portage, WI
**"Skin infections in athletes" for the Section on Sports Medicine, and plenary session
On performance enhancing drugs" American Academy of Pediatrics National Conference
Exhibition, Boston
"The acutely injured knee" GHC CME conference, Madison, WI

2012

"Approach to Adolescents", Patient, Doctor & Society Course, 1st year medical students, Madison, WI
"Public Health and musculoskeletal problems" lecture and case review. 2nd year medical student Musculoskeletal Block.
"Performance enhancing drugs" 2nd year medical student Endocrinology course, Madison, WI
The knee and ankle exam. 2 hour "PEARL" workshop for pediatric residents, Madison, WI
***"Medical aspects of sports medicine II" American Orthopedic Society for Sports Medicine Board review course. Chicago, IL
*Concussions in athletes" Wisconsin Academy of Physician Assistants, annual meeting, Green Bay, WI
*Concussions in athletes" Loyola University Pediatric Department Grand Rounds, Chicago, IL

2013

undergraduate
Course, Madison
"Approach to the Adolescent" Patient, Doctor, and Society Course, 1st year medical

students,
Madison, WI
"Performance Enhancing Drugs" Endocrine Fellows Conference Madison, WI
"Concussions in athletes" Kinesiology conference, Madison WI

"Performance enhancing drugs" 2nd year medical students, Madison, WI
"Hip case" for Words of wisdom section of annual UW Sports Medicine Symposium,
Madison
WI

"Concussions in athletes" for "Safe Kids" program, Madison, WI
***"Medical aspects of sports medicine III" American Orthopedic Society for Sports Medicine Board review course. Chicago, IL
Concussion controversies, sports medicine fellow conference Madison, WI
***"The pediatrician as team physician: Sideline scenarios" and, two workshops with Dr. Andy Peterson University of Iowa, "Hands-on exam of the knee and ankle" AAP NCE, Orlando, FL

2014

undergraduate
Course, Madison
"Approach to the Adolescent" Patient, Doctor, and Society Course, 1st year medical

students,
Madison, WI
*"Management of concussions in athletes," Infectious mononucleosis and the athlete," Exercise induced asthma: Or is it?" Pitfalls in sports medicine: A case based approach." Workshops X 3: Top ten sports injuries in pediatrics. For Pediatric Potpourri: State of the Art 2014, California chapter of the AAP, Maui HI

		*"Concussions in athletes" A panel discussion for Wisconsin Alumni Associated Founder's Day Chicago IL
		"Performance enhancing drugs" 2 nd year medical students, Madison, WI
		"Ethical issues in sports medicine: A physician's reflections" for U.W. School of Public Health and Health 6 th annual Bioethics Symposium 2014, Madison, WI
		"30 Pearls for 30 years" U.W. Sports Medicine Symposium Madison, WI
		"Concussions in athletes" and two workshops "Top ten sports injuries in pediatrics" for 35 th Sanford Black Hills Pediatric Symposium, Deadwood, SD
		**"To Hit or Not To Hit: That is the question" A debate at Council of Sports Medicine and Fitness, and plenary presentation "Sports Dermatology for the Pediatrician" American Academy of Pediatrics National Convention and Exhibition, San Diego CA
2015	Health undergraduate	"Growth and Maturation" and "performance enhancing drugs" for athletic trainer Course, Madison
		*"Management of concussions in athletes," "Anterior knee pain in young athletes," "Pitfalls in sports medicine: A case based approach" Blank Children's Hospital Pediatric Conference, Des Moines, IA
		"Performance enhancing drugs" 2 nd year medical students, Madison, WI
		"30 Pearls for 30 years" Pediatric Grand Rounds, Madison WI
		*"to Hit or not to hit: tackling in youth football" "30 Pearls for 30 years" Challenging sports medicine cases" "Managing Concussions in athletes" Visiting professor, Lurie Children's Hospital, Chicago, IL
		**"Tackling in Youth Football" AAP plenary session, "Tackling in Youth Football: To Hit or not to Hit" Selected Short Subject, AAP National Conference and Exhibition, Washington DC
2016	Health undergraduate	"Growth and Maturation" and "performance enhancing drugs" for athletic trainer Course, Madison
		**"Concussions in rugby" and panel discussion on should kids play rugby and tackle football. USA
		Rugby Medical Conference, Las Vegas, NV
		"Performance enhancing drugs" 2 nd year medical students, Madison, WI
		**"Pitfalls in sports medicine" "Tackling in youth football" "30 pearls for 30 years" keynote speaker for 10 th annual pediatric and adolescent sports medicine update, University of Virginia, Norfolk, VA
2017	Health undergraduate	"Growth and Maturation" and "performance enhancing drugs" for athletic trainer Course, Madison

EXHIBIT B

**Harvard Medical School
Curriculum Vitae**

Date Prepared: August 23, 2018

Name: Francis Wang

Office Address: Harvard University Health Services
75 Mount Auburn Street, Cambridge, MA 02138

Home Address: 297 Woodward Street, Waban, MA 02468

Work Phone: 617-495-2001

Work Email: fwang@uhs.harvard.edu

Work FAX: 617-496-0530

Place of Birth: Monmouth, NJ

Education

1988	A.B.	Art History	Dartmouth College, Hanover, NH
1992	M.D.	Medicine	Tufts University School of Medicine, Boston, MA

Postdoctoral Training

7/92-6/95	Clinical Fellow	Medicine	Harvard Medical School, Boston, MA
7/92-6/93	Intern	Medicine	Mount Auburn Hospital, Cambridge, MA
7/93-6/95	Resident	Medicine	Mount Auburn Hospital

Faculty Academic Appointments

7/96-7/08	Clinical Instructor	Medicine Division of General Medicine	Harvard Medical School (Massachusetts General Hospital, Boston MA)
7/08-3/2014	Clinical Instructor	Medicine	Harvard Medical School (Brigham and Women's Hospital, Boston MA)
3/2014-	Assistant Professor	Medicine	Harvard Medical School (Brigham and Women's Hospital, Boston MA)

Appointments at Hospitals/Affiliated Institutions

7/95-	Physician	Medicine	Harvard University Health
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7/96-	Associate Physician	Medicine Division of General Medicine	Services, Cambridge, MA Brigham and Women's Hospital
7/96-	Courtesy Staff	Medicine	Mount Auburn Hospital
7/96-	Courtesy Staff	Medicine	Beth Israel Deaconess Medical Center, Boston, MA
7/00-	Team Physician	Primary Care	Harvard University Athletics Department, Cambridge, MA

Other Professional Positions

2004-	Health Care Consultant	Harvard University Sports Summer Camps, Cambridge, MA
2010	Medical Advisor/Emergency Medical Dispatch	Harvard University Police Department, Cambridge, MA
2011	External Reviewer for the sports medicine program	Dartmouth College Health Services and Sports Medicine, Hanover, NH
2012-	Team Physician	Boston Red Sox Baseball Club, Boston, MA
2017	External Reviewer for the sports Medicine program	Bates College Sports Medicine, Lewiston, ME

Major Administrative Leadership Positions

Local

1996-1999	Director, After Hours Urgent Care Clinic	Harvard University Health Services
2002-	Medical Director, Automatic External Defibrillator Program	Harvard University
2010-	Director, Sports Medicine	Harvard University Athletics Department
2006-	Co-founder, Harvard Athletic Initiative	Harvard University

Committee Service

Local

1997-	Member, Code Committee	Harvard University
2000-2009	Member, Eating Concerns Hotline and Outreach Advisory Group	Harvard University
2005-2013	Member, Pharmacy and Therapeutics Committee	Harvard University Health Services

Professional Societies

1992-	Massachusetts Medical Society	Member
2010-2018		Member, Student Health/Sports Medicine Committee
2000-2010	American College of Sports Medicine	Member
2011-	American Medical Society for Sports	Member

Medicine

Editorial Activities

2013 Reviewer American Journal of Sports Medicine

Honors and Prizes

2005	Prize for Excellence in Teaching (Years 3&4), Nominee	Harvard Medical School	Teaching
2013	Dean's Distinction, Nominee	Harvard College Faculty of Arts and Sciences	Outstanding Contribution and Leadership in the Faculty of Arts and Sciences
2014	Dr. David G. Moyer Team Physician Award, Nominee	Eastern Athletic Trainers Association	Serving athletic training profession as an educator and advocate

Report of Local Teaching and Training

Teaching of Students in Courses

Harvard Medical School

1994-1995	Introduction to Clinical Medicine Medical students, Year 2	Mount Auburn Hospital 10 hours/week for 4 weeks
2010, 2011	"Primary Medical Care in a University Setting" elective course Medical students, Year 4	Harvard University Health Services 15 hours/week for 4 weeks

Clinical Supervisory and Training Responsibilities

1996, 1998, 2002, 2006, 2007	Ambulatory Clinic Preceptor/ Harvard University Health Services, Primary Care Residents	12 hours/week for 6 weeks Cambridge Hospital, Cambridge, MA and Beth Israel Deaconess Medical Center, Boston, MA
1997-2015	Primary Care Clerkship/ Brigham and Women's Hospital, Harvard Medical Students, Years 3 and 4	12 hours/month 9 months per student
2006-	Case discussion, teaching of physical therapy students and athletic training students, Harvard University Athletic Training Room	2 hours/month
2010, 2011	Ambulatory Clinic Preceptor/ Harvard University Health Services Elective "Primary Medical Care in a University Setting", Harvard Medical Students, Year 4	12 hours/week for 4 weeks

Local Invited Presentations

No presentations below were sponsored by outside entities

2005	Experiences of Being a Team Physician/ Physical Medicine and Rehabilitation Seminar Spaulding Rehabilitation Hospital, Boston, MA
2005	Medical Issues in Athletes/ Sports Medicine Conference Massachusetts General Hospital
2005	Management of Sports Concussion/ Sports Medicine Conference Massachusetts General Hospital
2005	Infectious Issues in Athletes/ Sports Medicine Conference Massachusetts General Hospital
2006	Preseason Screening in Athletes/ Sports Medicine Conference Massachusetts General Hospital

Report of Regional, National and International Invited Teaching and Presentations

Invited Presentations and Courses

No presentations below were sponsored by outside entities

Regional

2010, 2011,	Infectious issues in Athletes/ Sports Medicine Conference
2012, 2013,	
2014, 2015,	
2016, 2017	New England Baptist Hospital, Boston, MA
2011, 2012,	Preseason Screening Athletes/ Sports Medicine Conference
2013, 2014,	
2015, 2016,	
2017	
2015	New England Baptist Hospital
2011	Sports Concussion/ Speaker/Expert Panelist
	Massachusetts Medical Society, Waltham MA
2011	Pre-Participation Exam for Athletes/ Grand Rounds
	Lowell General Hospital, Lowell, MA

National

2012	Primary and Secondary Prevention of Sudden Cardiac Arrest, Moderator Town Hall Meeting, Preventing Sudden Cardiac Arrest in Youths and Athletes, Citizen CPR Foundation at the Emergency Cardiovascular Update Conference, Orlando, FL
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Report of Clinical Activities and Innovations

Current Licensure and Certification

1995	Diplomate, American Board of Internal Medicine
2015	Recertification, American Board of Internal Medicine
2013	Massachusetts Medical License

Practice Activities

1995-	Primary Care	Harvard University Health Services	7 four-hour sessions per week
2000-	Sports Medicine	Harvard Department of Athletics	2 four-hour sessions per week
2000-	Sports Medicine	Harvard Department of Athletics/National Collegiate Athletic Association	1 game or championship event per week

Clinical Innovations

2002 **Harvard University AED Program:**
I am the Harvard University Medical Director of the Automatic External Defibrillator Program, which I helped launch in 2002. After receiving a donation, I organized the purchase and implementation of 35 AEDs for the health services, campus police force, and athletics. Under my direction, we now have grown the program to approximately 250 AEDs throughout the Harvard campus. We continue to expand the program, and by the end of 2012, will also have placed AEDs in all of the undergraduate houses. Since the inception, there have been two successful resuscitations using the AEDs on our campus.

2005 **Sports Related Concussion Management Plan:**
Recognizing the potential effects of concussions on long term health and safety of Harvard University student athletes, we initiated a concussion management plan in March 2005. We began performing pre-season baseline screening of all contact athletes using a neuropsychological computerized test, called IMPACT (Immediate Post-Concussion Assessment and Cognitive Testing). This tool has been helpful to give the medical staff objective evidence of recovery from concussion, and we developed clinical protocols for safe return to play which we continue to use today. We have also added balance testing to our management of concussion in 2011. Starting fall 2013, I have submitted and received institutional review board approval to add a balance application, called C3 developed from the Cleveland Clinic. This application will utilize the accelerometer in an iPad, and more uniformly measure the balance of the student-athletes.

2005 **Neuropsychological Testing:**
I organized and spearheaded the Harvard University Athletic Department's efforts to include more formalized neuropsychological testing in 2005. At that time, recognizing the potential for long term cognitive issues and decline with repeated head injuries, we added formal testing so as to have better objective data on concussion recovery which is now used in most athletic medical programs, from the middle school through professional levels. We continue to add different tests to aid in the management of our students who suffer concussions, and have added preseason balance testing to supplement the neuropsychological testing.

Report of Education of Patients and Service to the Community

No presentations below were sponsored by outside entities

Activities

2000-2009	Member of Eating Concern Hotline and Outreach program, Harvard University
2005-	Medical Director, Harvard Freshman Outdoor Program. Provide backup medical advice, responsible for clearance of all incoming freshman and trip leaders
2008-	Medical advisor to Gymnastics Coaches and Parent Group, New England Sports Academy
2010	Set up anterior cruciate ligament prevention clinic for adolescent gymnasts, New England Sports Academy
2011	Sports-Related Concussions: Clinical Perspectives and Programmatic Responses/ Concussion seminar for laypeople on behalf of the Massachusetts Medical Society Institution
2012	Advisor on Concussion Program for gymnastics club, New England Sports Academy

Educational Material for Patients and the Lay Community

No presentations below were sponsored by outside entities

Books, monographs, articles and presentations in other media

2001	Handout, "Tips to Stay Healthy" for student-athletes	Author	Harvard Department of Athletics
2009	Pamphlets, "Do's and Don'ts for Concussion," "Concussion and Alcohol" for student-athletes	Co-author	Harvard Department of Athletics
2010	Interviewed on EKG study on athletes	Interviewee	The Boston Globe

Report of Scholarship

Peer reviewed publications in print or other media

Research investigations

1. Steiner ME, Quigley DB, Wang F, Balint CR, Boland AL Jr.. Team Physicians in College Athletics. Am J Sports Med. 2005 Oct;33(10):1545-51

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2. Baggish AL, Wang F, Weiner RB, Elinoff JM, Tournoux F, Boland A, Picard MH, Hutter AM Jr, Wood MJ. Training-specific changes in cardiac structure and function: a prospective and longitudinal assessment of competitive athletes. *J Appl Physiol.* 2008 Apr;104(4):1121-8.
3. Baggish AL, Yared K, Wang F, Weiner RB, Hutter AM Jr, Picard MH, Wood MJ. The impact of endurance exercise training on left ventricular systolic mechanics. *Am J Physiol Heart Circ Physiol.* 2008 Sep;295(3):H1109-H1116.
4. Baggish AL, Weiner RB, Yared K, Wang F, Kupperman E, Hutter AM Jr, Picard MH, Wood MJ. Impact of family hypertension history on exercise-induced cardiac remodeling. *Am J Cardiol.* 2009 Jul 1;104(1):101-6.
5. Baggish AL, Hutter AM Jr, Wang F, Yared K, Weiner RB, Kupperman E, Picard MH, Wood MJ. Cardiovascular screening in college athletes with and without electrocardiography: A cross-sectional study. *Ann Intern Med.* 2010 Mar 2;152(5):269-75.
6. Baggish AL, Yared K, Weiner RB, Wang F, Demes R, Picard MH, Hagerman F, Wood MJ. Differences in cardiac parameters among elite rowers and subelite rowers. *Med Sci Sports Exerc.* 2010 Jun;42(6):1215-20.
7. Weiner RB, Hutter AM Jr, Wang F, Kim J, Weyman AE, Wood MJ, Picard MH, Baggish AL. The impact of endurance exercise training on left ventricular torsion. *JACC Cardiovasc Imaging.* 2010 Oct;3(10):1001-9.
8. Kim JH, Noseworthy PA, McCarty D, Yared K, Weiner R, Wang F, Wood MJ, Hutter AM, Picard MH, Baggish AL. Significance of electrocardiographic right bundle branch block in trained athletes. *Am J Cardiol.* 2011 Apr 1;107(7):1083-9.
9. Weiner RB, Hutter AM, Wang F, Kim JH, Wood MJ, Wang TJ, Picard MH, Baggish AL. Heart. Performance of the 2010 European Society of Cardiology criteria for ECG interpretation in athletes. *Heart.* 2011 Oct;97(19):1573-7. Epub 2011 May 20.
10. Daoud AI, Geissler GJ, Wang F, Saretsky J, Daoud YA, Lieberman DE. Foot Strike and Injury Rates in Endurance Runners: a retrospective study. *Med Sci Sports Exerc.* 2012 Jan 3.
11. Baggish AL, Hale A, Weiner RB, Lewis GD, Systrom D, Wang F, Wang TJ, Chan SY. Dynamic regulation of circulating microRNA during acute exhaustive exercise and sustained aerobic exercise training. *J Physiol.* 2011 Aug 15;589(Pt 16):3983-94. Epub 2011 Jun 20.
12. Noseworthy PA, Weiner R, Kim J, Keelara V, Wang F, Berkstresser B, Wood MJ, Wang TJ, Picard MH, Hutter AM Jr, Newton-Cheh C, Baggish AL. Early repolarization pattern in competitive athletes: clinical correlates and the effects of exercise training. *Circ Arrhythm Electrophysiol.* 2011 Aug 1;4(4):432-40. Epub 2011 May 4.
13. Weiner R., Hutter A., Wang F., Kim J., Wood M., Wang T., Picard M., Baggish A. Performance of the 2010 European Society of Cardiology criteria for ECG interpretation in athletes. *Heart* 2011. Sept 7. 1373-1377.

14. Weiner R, Wang F, Hutter A, Wood M, Berkstresser B, McClanahan C, Neary J, Marshall J, Picard M, Baggish A. The Feasibility, Diagnostic Yield, and Learning Curve of Portable Echocardiography for Out-of-Hospital Cardiovascular Disease Screening. *JASE* MS NO 4683R2. 2012.
15. Weiner R, Wang F, Berkstresser B, Kim J, Wang T, Lewis G, Hutter A, Picard M, Baggish, A. Research correspondence: Regression of “Gray Zone” Exercise-Induced Concentric Left Ventricular Hypertrophy. *JACC* 2012; 59;1992-1994.
16. Wasfy M, Deluca J, Wang F, Berkstresser B, Ackerman K, Eisman A, Lewis G, Hutter A, Weiner R, Baggish A. ECG Findings in Competitive Rower: Normative Data and the Prevalence of Abnormalities Using Contemporary Screening Recommendation. *BJSM* 2015;49:200-206 doi:10.1136/bjsports-2014-093919.
17. Steiner, M, Wang F, et al. Full Contact Practice and Injuries in College Football. *SPORTSHEALTH*/2015/019539
18. Weiner R, Deluca J, Wang F, et al. Exercise-Induced Left Ventricular Remodeling Among Competitive Athletes: A Phasic Phenomenon. DOI: 10.1161/CIRCIMAGING.115.003651. 12/2015
19. Lin, Wang F, et al. Blood Pressure and Left Ventricular Remodeling Among American Style Football Players. *JACC Cardiovascular Imaging* 6/2016.
20. Wasfy, Wang F, et al. Myocardial Metabolism in Endurance Exercise-Induced Left Ventricular Hypertrophy. *JACC: Cardiovascular Imaging*. 7/2017
21. Howell D, Stillman A, Buckley T, Berkstresser B, Wang F, Meehan W. Utility of Instrumented Dual-task Gait and Tablet-based Neurocognitive Measurements After Concussion. *Journal of Science and Medicine in Sport*. 8/2017.

Non-peer reviewed scientific or medical publications/materials in print or other media

Books/Textbooks for the medical or scientific community

1. Geissler, G, Berkstresser, B, Wang, F . Chapter 23, Traumatic Injuries to the Cervical Spine. In: Magee DJ, Manske R, Zachazewski J, Quillen W *Athletic and Sport Issues in Musculoskeletal Rehabilitation*. 2011, pages 549-580.

Narrative Report

With my lifelong interest in sports, I have been able to combine this with my professional career. I began

as an internist at Harvard University Health Services (HUHS) in 1995, became a Harvard Athletics Team Physician in 2000, and transitioned into the Director of Sports Medicine in 2010. I now split my duties between HUHS and the Department of Athletics, and as the Director of Sports Medicine, I focus my clinical time and research on sports cardiology and concussions, and teach medical, athletic training, and physical therapy students, and medical residents into my clinical work.

From the beginning of my career, I have been involved in teaching activities. Since 1997, I have served as a preceptor for the Primary Care Clerkship with Harvard medical students. I have been able to precept students, and teach them office based medicine. Students have accompanied me to cover athletic events, and thus, the teaching includes many non-traditional venues. Besides having medical students, I have supervised medical residents on several occasions for their rotations at HUHS. I continue to teach physical therapy and athletic training students in the training room during their clinical rotations as part of their curricula. I have also been asked to speak on a variety of sports medicine-related topics in the local area for interns, residents, and medical staffs.

My major clinical focus and research interests have been related to taking care of what I believe to be the two most important aspects of a Harvard student-athlete, the heart and brains of these extraordinarily talented young men and women.

On the cardiac side, I collaborate with colleagues from the Massachusetts General Hospital in ongoing research on the pre-participation examination to include advanced cardiac screening in order to minimize the risk of sudden cardiac death during athletics. We published our findings in the Annals of Internal Medicine in 2010, and this study has been well-received as I, and the other authors, have had multiple invitations to speak on this important topic. We continue with this research, having published thirteen papers in peer-reviewed journals.

In the spring of 2011, I was asked by my alma mater, Dartmouth College, to serve as an external reviewer of their sports medicine program. As the Director of Sports Medicine at Harvard, the College wanted to have an expert panel (I was one of three reviewing physicians) to examine the Health, Counseling, and Sports Medicine services, and to make observations and recommendations about improving those services. This was done after a three-day site visit and a report was generated and presented to the Dean and President of Dartmouth College in hopes of facilitating some positive changes for the health of the students and athletes. As a result of our recommendations, the College hired two more athletic trainers for the sports medicine program.

In summary, I hope to continue my efforts at making sports participation on a collegiate level to be as safe as possible, with focus on properly managing sports-related concussions. I hope to further research sports cardiology topics, with particular focus on the pre-participation examinations. In addition, I will remain working as a full-time primary care physician, and supervise athletic training, physical therapy and medical students, and residents in a clinical setting.

EXHIBIT C

List of Publications Reviewed by Perkins

Richard H. Strauss, <i>I Think, Therefore: Perspectives in Biology and Medicine</i> 516-519 (1965).	1965
J. Kanwisher, K. Lawson & R. Strauss, <i>Acoustic Telemetry for Human Divers.</i> 1(1) Undersea Biomedical Research 99-109 (1974).	1974
Richard H. Strauss, <i>Bubble Formation in Gelatin: Implications for Prevention of Decompression Sickness.</i> 1(2) Undersea Biomedical Research 169-174 (1974).	1974
J.M. Hanna, et al., <i>Marijuana Smoking and Cold Exposure in Nude Men.</i> 34(3) Federation Proceedings 478 (1975).	1975
M. Matsuda, et al., <i>Physiology of Man During a 10-Day Dry Heliox Saturation Dive (SEATOPIA) at 7 ATA. I. Cardiovascular and Thermoregulatory Functions.</i> 2(2) Undersea Biomedical Research 101-118 (1975).	1975
Joel M. Hanna, et al., <i>Marijuana Smoking and Cold Tolerance in Man.</i> 47(6) Aviation, Space and Environmental Medicine (1976).	1976
Richard H. Strauss, et al., <i>Comparison of Arm Versus Leg Work in Induction of Acute Episodes of Asthma.</i> 42(4) J. of Applied Physiology 565-570 (1977).	1977
Richard H. Strauss, et al., <i>A Critical Assessment of the Roles of Circulating Hydrogen Ion and Lactate in the Production of Exercise-Induced Asthma.</i> 60(3) J. Clinical Investigation 658-664 (1977).	1977
Richard H. Strauss, et al., <i>Enhancement of Exercise-Induced Asthma by Cold Air.</i> 297 New Eng. J. Med. 743-747 (1977).	1977
Richard H. Strauss, et al., <i>Influence of Heat and Humidity on the Airway Obstruction Induced by Exercise in Asthma.</i> 61 J. Clinical Investigation 433-440 (1978).	1978
E. Chandler Deal, Jr., et al., <i>The Role of Respiratory Heat Exchange in the Production of Exercise-Induced Asthma.</i> US Army Research Inst. of Envtl. Med. (1978).	1978
Richard H. Strauss, Sports Medicine and Physiology (1979).	1979
Richard H. Strauss, <i>State of the Art Diving Medicine.</i> 119 The Am. Review of Respiratory Disease 1001- 1023 (1979).	1979

List of Publications Reviewed by Perkins

Richard H. Strauss et al., <i>Loss of Consciousness in Divers: Potential Circulatory Factors</i> , in <i>The Unconscious Diver: Respiratory Control and Other Contributing Factors</i> (Edward H. Lanphier ed., 1982)	1982
Richard H. Strauss, et al., <i>Anabolic Steroid Use and Health Status Among Forty-Two Weight-Trained Male Athletes</i> . <i>Medicine & Science in Sports & Exercise</i> 119 (1982).	1982
Richard H. Strauss, et al., <i>Creatine Kinase MB Isoenzyme Among Competitive Swimmers</i> . 306(19) <i>New Eng. J. Med.</i> 1180-1180 (1982).	1982
Richard H. Strauss, et al., <i>Hazards of Aluminum Bats</i> . 307(13) <i>New Eng. J. Med.</i> 829 (1982).	1982
Richard H. Strauss, et al., <i>Injuries Among Wrestlers in School and College Tournaments</i> . 248(18) <i>JAMA</i> 22-29 (1982).	1982
Richard H. Strauss, <i>Medical Concerns in Underwater Sports</i> . 29(6) <i>Pediatric Clinics of North America</i> 1431-1440 (1982).	1982
R. Gelfand, et al., <i>Human Respiration at Rest in Rapid Compression and at High Pressures and Gas Densities</i> . 54(1) <i>J. of Applied Physiology</i> . 290-303 (1983).	1983
Richard H. Strauss, et al., <i>Side Effects of Anabolic Steroids in Weight-Trained Men</i> . 11(12) <i>The Physician and Sportsmedicine</i> . 87-96 (1983).	1983
Richard H. Strauss & Timothy Jon Curry, <i>Social Factors in Wrestlers' Health Problems</i> , 11(11) <i>The Physician and Sportsmedicine</i> , 86-99 (1983).	1983
Richard H. Strauss, <i>Effects of Drugs and Pathophysiology on Regional Perfusion</i> . <i>The Ohio State Univ. Research Foundation</i> (1983).	1983
Richard H. Strauss, <i>Anabolic Steroids</i> , 3(3) <i>Clinics in Sports Medicine</i> , 743-748 (1984).	1984
Richard H. Strauss, et al., <i>Weight Loss in Amateur Wrestlers and Its Effect on Serum Testosterone Levels</i> . 254(23) <i>JAMA</i> 3337-3338 (1985).	1985
Richard H. Strauss, Mariah T. Liggett, & Richard R. Lanese, <i>Anabolic Steroid Use and Perceived Effects in Ten Weight-Trained Women Athletes</i> . 253(19) <i>JAMA</i> , 2871-2873 (1985).	1985

List of Publications Reviewed by Perkins

Richard H. Strauss, <i>A Singular Approach to Ethics.</i> 14(11) The Physician and Sportsmedicine, 17-17 (1986).	1986
Richard H. Strauss (1987) Medical Aspects of Wrestling, The Physician and Sportsmedicine, 15:1, 133-133.	1987
Richard H. Strauss, <i>Full Time Sports Medicine.</i> 15(1) The Physician and Sportsmedicine, 29-29 (1987).	1987
Richard H. Strauss, <i>Introducing a New Board Member.</i> 15(2) The Physician and Sportsmedicine, 13-13 (1987).	1987
Richard H. Strauss, <i>Controlling the Supply of Anabolic Steroids.</i> 15(5) The Physician and Sportsmedicine 45-45 (1987)	1987
Richard J. Davies, et al., <i>College Wrestler with Unilateral Gynecomastia - A Case Conference.</i> 15(12) The Physician and Sportsmedicine, 115-121 (Mark D. Bracker, ed., 1987).	1987
Richard H. Strauss, Drugs and Performance in Sports. (1987).	1987
Jack Harvey, et al., <i>Medical Problems of Wrestlers.</i> 15(1) The Physician and Sportsmedicine, 137-144 (1987).	1987
Richard H. Strauss, <i>Infectious Diseases in Temperate Climates.</i> The Olympic Book of Sports Medicine 589-602 (A. Dirix, et al., eds., 1988).	1988
Richard H. Strauss, <i>Three Subjects in Search of a Reader.</i> 16(3) The Physician and Sportsmedicine 3-3 (1988).	1988
Richard H. Strauss, <i>Infectious Diseases in Temperate Climates.</i> The Olympic Book of Sports Medicine 589-602 (A. Dirix, et al., eds., 1988).	1988
Richard H. Strauss, <i>Drug Abuse in Sports: A Three-Pronged Response.</i> 16(2) The Physician and Sportsmedicine, 47-5 (1988).	1988
Richard H. Strauss, Richard R. Lanese, and Daniel J. Leizman, <i>Illness and Absence Among Wrestlers, Swimmers, and Gymnasts at a Large University,</i> 16(6) Am. J. Sports Med. 653-655, 1988.	1988

List of Publications Reviewed by Perkins

L. Arick Forrest, et al., <i>Management of Orbital Blow-Out Fractures: Case Report and Discussion.</i> 17(3) Am. J. Sports Med. 217-220 (1989).	1989
Richard H. Strauss, <i>Finding a Niche in Sports Medicine.</i> 17(9) The Physician and Sportsmedicine, 51-51 (1989).	1989
Richard H. Strauss, <i>Statisticians Count.</i> 17(9) The Physician and Sportsmedicine, 3-3 (1989).	1989
Richard H. Strauss, <i>Anabolic Steroid Use by Young Athletes.</i> Common Problems in Pediatric Sports Medicine 131-135 (Nathan J. Smith Ed. 1989).	1989
Richard H. Strauss, <i>High School Kids: Looking Better, Living Worse?</i> 17(2) The Physician and Sportsmedicine, 35-35 (1989).	1989
Richard H. Strauss, et al., <i>Abrasive Shirts May Contribute to Herpes Gladiatorum Among Wrestlers.</i> 320(9) New Eng. J. Med. 598-599 (1989).	1989
Schuller, D.E., Dankle, S.D., Strauss, R.H., <i>A Technique to Treat Wrestlers' Auricular Hematoma Without Interrupting Training or Competition</i> Arch. Otolaryn. 115:202-206, 1989	1989
Schuller, D.E., Dankle, S.K., Martin, M., and Strauss, R.H., <i>Auricular Injury and the Use of Headgear in Wrestlers</i> Arch. Otolaryn. 115:714-717, 1989	1989
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